FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P93000083851 (4)**

1. Corporation Name

BUGGS TRANSPORTATION, INC.

Principal Place of Business

3119 SPRING GLEN RD
STE 113
JACKSONVILLE FL 32207
US

Mailing Address

P.O. BOX 2125
JACKSONVILLE FL 32203-2125

2. Principal Place of Business
21 6804 Norwood Ave
Suite, Apt. #, etc.
22
City & State
23 Jacksonville, Fl
Zip 24 32208 Country 25 Duval

2a. Mailing Address
26 P.O. Box 2125
Suite, Apt. #, etc.
27
City & State
28 Jacksonville, Fl
Zip 29 32203 Country 30 Duval

3. Date Incorporated or Qualified: 12/02/1993

3a. Date of Last Report: 02/23/1995

4. FEI Number: 59-3214511 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

OUTLER, EDWARD T
3119 SPRING GLEN ROAD
SUITE 113
JACKSONVILLE FL 32207

10. Name and Address of New Registered Agent

81 Name: OUTLER, Edward T
82 Street Address (P.O. Box Number is Not Acceptable): 6804 Norwood Ave
83
84 City: Jacksonville FL 85 Zip Code: 32208

11. Pursuant to the provisions of Sections 607.0502 and 607.0505, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE — DATE

12. OFFICERS AND DIRECTORS

TITLE: DP ☐ DELETE
NAME: OUTLER, EDWARD T
STREET ADDRESS: 3119 SPRING GLEN ROAD, SUITE 113
CITY, ST, ZIP: JACKSONVILLE FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY, ST, ZIP

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TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY, ST, ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY, ST, ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY, ST, ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY, ST, ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY, ST, ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(y), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Edward T. Outler — Edward T. Outler — 1-24-96 — 904-768-5700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)