FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000087607

1. Corporation Name

CORONADO TRANSPORTATION, INC.

Principal Place of Business Mailing Address						
301 OLD COUNTY RD 301 OLD COUNTY RD						
EDGEWATER FL	EDGEWATER FL 32132	WATER FL 32132			DO NOT WRITE IN THIS SPACE	
US US						3. Date Incorporated or Qualifed
						12/22/1993
O Detailed D	loos of Durings	2a. Mailing Address				4. FEI Number Applied For
	lace of Business					
21 Suite Ant	# oto	26 Suite Apt # etc	Suite, Apt. #, etc.			59-3213744 Not Applicable
F						5. Certificate of Status Desired Fee Required
22						6. Election Campaign Financing S5.00 May Be
<u> </u>	c	28	Oily & Oilaid			Trust Fund Contribution Added to Fees
23 28 Zip Zip Zip			Country			8. This corporation owes the current year Intangible
<u> </u>	25	29	30			Personal Property Tax.
24	9. Name and Address of Curi					10. Name and Address of New Registered Agent
	3. Name and Addition of Care	The state of the s		81	Name	
HEEBNER, PETER B						
523 N. HALIFAX AVE			Í	82	Street Addres	ss (P.O. Box Number is Not Acceptable)
DAYTONA BEACH FL 32118				83		
)						
				84	City	FI 85 Zip Code
10 / 007 0700 1007 4500 Florida Obd. No. 400 about					named asmo	ration submits this statement for the purpose of changing its registered
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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						
GIGHTATORE	Signature, typed or printed name of registered a	agent and title if applicable. (NO	E: Registered /	gent	t signature required v	
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	☐ DELETÉ	1.1 TIT	.E		☐ Change ☐ Addition
NAME	BOSSET, CHRISTIAN	1.2 N		Æ		
STREET ADDRESS	308 OLD COUNTY RD		1.3 STRE		ADDRESS	
CITY+ST-ZIP	EDGEWATER FL		1.4 CIT		T-ZIP	
TITLE	ST	☐ DELETE	2.1 TITI	.E		☐ Change ☐ Addition
NAME	KEESECKER, ROBERT P		2.2 NAME		1	
STREET ADDRESS	ss 308 OLD COUNTY RD		2.3 STF	EET.	ADDRESS	
CITY-ST-ZIP			2. 4 CIT	Y-S	T-2IP	
TITLE	S	☐ DELETE	3.1 TITI	Æ		☐ Change ☐ Addition
NAME	DILL, DAVID		3.2 NA	Æ		
STREET ADDRESS	308 OLD COUNTY RD	ITY RD 3		EET	ADDRESS	
CITY-ST-ZIP	EDGEWATER FL	<u> </u>	3.4. CF	Y-5	T-ZIP	
TITLE	D	☐ DELETE	4.1 TIT	.E		☐ Change ☐ Addition
NAME	BOSHELL, GREG 4.21		4, 2 NA	ME		
STREET ADDRESS	STREET ADDRESS 48 WALKER STREET		4.3 STF	4.3 STREET ADDRESS		
CITY-ST-ZIP	CANADA BAY NSW AUSTRALIA 2046 440		4,4 CIT	Y-\$T	T-ZIP	
TITLE	S	☐ DELETE	5.1 TITE			Change Addition
NAME	SHORT, HERBERT J JR		5.2 NAME			
STREET ADDRESS	I		5.3 STF	≀EET	ADDRESS	
CITY-ST-ZIP			5.4 CIT	Y-ST	T-ZIP	
TITLE) river attri (41)	DELETE	6.1 TITI	E		☐ Change ☐ Addition
NAME			6.2 NA	Æ	İ	
STREET ANDRESS			6.3 STF	REET	ADDRESS	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 07, 1999 8:00 am Secretary of State

05-07-1999 90091 050 ***150.00

CR2E034 (11/98)

≣

≡ 72:

■75.