

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P93000088015 (1)**

1. Corporation Name

JD TRANSPORTATION INCORPORATED



Principal Place of Business

**3003 PENNINGTON DR
ORLANDO FL 32804
US**

Mailing Address

**P. O. BOX 1243
ORLANDO FL 32801
US**

2. Principal Place of Business

2a. Mailing Address

21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Zip
24	Country	29	Country

g. Name and Address of Current Registered Agent

**TIMOTHY M. DOLAN
3003 PENNINGTON DR.
ORLANDO FL 32801**

3. Date Incorporated or Qualified

12/20/1993

3a. Date of Last Report

03/30/1995

4. FEE Number

59-3213919

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

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

FL 32802

11. Pursuant to the provisions of Sections 607.0502 and 607.1305, 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

Signature of the person who is changing the registered office or agent

Signature of the New Agent (Signature is not required if the agent is the same as the current agent)

DATE

12. OFFICERS AND DIRECTORS

12.1	TITLE	D	☐ DELETE
12.2	NAME	DOLAN, TIMOTHY M	
12.3	STREET ADDRESS	2326 WESTMINSTER TERRACE	
12.4	CITY-STATE-ZIP	OVIEDO FL 32765	
12.5	TITLE		☐ DELETE
12.6	NAME		
12.7	STREET ADDRESS		
12.8	CITY-STATE-ZIP		
12.9	TITLE		☐ DELETE
12.10	NAME		
12.11	STREET ADDRESS		
12.12	CITY-STATE-ZIP		
12.13	TITLE		☐ DELETE
12.14	NAME		
12.15	STREET ADDRESS		
12.16	CITY-STATE-ZIP		
12.17	TITLE		☐ DELETE
12.18	NAME		
12.19	STREET ADDRESS		
12.20	CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1	TITLE	☐ Change ☐ Addition
13.2	NAME	
13.3	STREET ADDRESS	
13.4	CITY-STATE-ZIP	
13.5	TITLE	☐ Change ☐ Addition
13.6	NAME	
13.7	STREET ADDRESS	
13.8	CITY-STATE-ZIP	
13.9	TITLE	☐ Change ☐ Addition
13.10	NAME	
13.11	STREET ADDRESS	
13.12	CITY-STATE-ZIP	
13.13	TITLE	☐ Change ☐ Addition
13.14	NAME	
13.15	STREET ADDRESS	
13.16	CITY-STATE-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)(k), 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 nominee 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:

Timothy M. Dolan **Timothy M. Dolan President 3/5/96 (407) 292-7224**

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)