

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 30, 2002 8:00 am
Secretary of State

01-30-2002 90067 038 ***150.00

DOCUMENT # P93000088115

1. Entity Name
CHUNGA FREIGHT CO., INC.

Principal Place of Business
**80 INDUSTRIAL LOOP NORTH
BLDG. 3
ORANGE PARK FL 32073**

Mailing Address
**6142 LAKE GRAY BLVD
JACKSONVILLE FL 32244**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3223509**

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~POINTS, TIM~~
~~6142 LAKE GRAY BLVD~~
~~JACKSONVILLE FL 32244~~

Name
Kerry Bentley
Street Address (P.O. Box Number is Not Acceptable)
6142 LAKE GRAY BLVD
City
Jacksonville **FL** Zip Code
32244

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE **KERRY BENTLEY**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/15/02

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P**
NAME **KERRY BENTLEY**
STREET ADDRESS **1951 SOUTH OCEAN DRIVE**
CITY-ST-ZIP **JACKSONVILLE BEACH FL**

TITLE **P/T**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **V**
NAME **HETZ, WALTER**
STREET ADDRESS **10516 HAMLET TERR.**
CITY-ST-ZIP **JACKSONVILLE FL**

TITLE **V/S**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **ST**
NAME **POINTS, TIMOTHY**
STREET ADDRESS **7042 BUCKBOARD CT**
CITY-ST-ZIP **MIDDLEBURG FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **KERRY BENTLEY**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/15/02
Daytime Phone # **904-317-5601**

CR2E034 (9/01)