

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P94000003104

FILED
Apr 29, 2002 8:00 AM
Secretary of State

Entity Name: CLAY HYDER TRUCKING LINES, INC.

Current Principal Place of Business:

P O DRAWER 67
AUBURNDALE, FL 33823

New Principal Place of Business:

Current Mailing Address:

P O DRAWER 67
AUBURNDALE, FL 33823

New Mailing Address:

FEI Number: 59-3218649

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACOBS, MILTON E
502 E BRIDGERS AVE
AUBURNDALE, FL 33823 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BOSTICK, R. MARK
Address: P O DRAWER 67 N/A
City-St-Zip: AUBURNDALE, FL

Title: VTD () Delete
Name: JACOBS, MILTON E
Address: P O DRAWER 67 N/A
City-St-Zip: AUBURNDALE, FL

Title: S (X) Delete
Name: READY, BILLY R
Address: 502 E. BRIDGERS AVE.
City-St-Zip: AUBURNDALE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BOSTICK, R. MARK
Address: 502 E. BRIDGERS AVENUE
City-St-Zip: AUBURNDALE, FL 33823

Title: TSD (X) Change () Addition
Name: JACOBS, MILTON E
Address: 502 E. BRIDGERS AVENUE
City-St-Zip: AUBURNDALE, FL 33823

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MILTON E. JACOBS

TSD

04/29/2002

Electronic Signature of Signing Officer or Director

Date