

5-13-97 B-7055 C  
FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED  
May 13 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P94000024153 (6)

1. Corporation Name

TAYLOR MOTOR EXPRESS, INC.

Principal Place of Business

2298 SLOOP CT  
MIDDLEBURG FL 32068

Mailing Address

2298 SLOOP CT  
MIDDLEBURG FL 32068-6804



2. Principal Place of Business

21 Route 2, Box 1780

Suite, Apt. #, etc.

22 Tim Rhoden Road

City & State

23 Glen St. Mary, FL 32040

Zip

Country

24 32040

25 USA

2a. Mailing Address

26 Route 2, Box 1780

Suite, Apt. #, etc.

27 Tim Rhoden Road

City & State

28 Glen St. Mary, FL 32040

Zip

Country

29 32040

30 USA

3. Date Incorporated or Qualified

03/24/1994

3a. Date of Last Report

05/01/1996

4. FEI Number

59-3235272

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

TAYLOR, TOMMY M  
2298 SLOOP CT  
MIDDLEBURG FL 32068

10. Name and Address of New Registered Agent

81 Name

Taylor, Tommy M.

82

Street Address (P.O. Box Number is Not Acceptable)

Route 2, Box 1780

83

Tim Rhoden Road

84

City

Glen St. Mary

FL

85

Zip Code  
32040

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

*Tommy M. Taylor*

President

04-22-97

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

P  
NAME  
TAYLOR, TOMMY M  
STREET ADDRESS  
2298 SLOOP COURT  
CITY-ST-ZIP  
MIDDLEBURG FL

TITLE ☒ DELETE

V  
NAME  
TAYLOR, ALICE E  
STREET ADDRESS  
15561 BREAM RD  
CITY-ST-ZIP  
JACKSONVILLE FL

TITLE ☐ DELETE

ST  
NAME  
TAYLOR, FRANCES  
STREET ADDRESS  
2298 SLOOP COURT  
CITY-ST-ZIP  
MIDDLEBURG FL

TITLE ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

P  
NAME  
Taylor, Tommy M.  
1.2 STREET ADDRESS  
Route 2, Box 1780 Tim Rhoden Rd.  
1.3 CITY-ST-ZIP  
Glen St. Mary, Florida 32040

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

ST  
NAME  
Taylor, Frances M.  
3.2 STREET ADDRESS  
Route 2, Box 1780 Tim Rhoden Rd.  
3.3 CITY-ST-ZIP  
Glen St. Mary, Florida 32040

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 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.

SIGNATURE *Tommy M. Taylor*

CR2E034 (9/96)