FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P94000027323 (2)**

1. Corporation Name

BLENHEIM TRANSPORT SERVICES, INC.

Principal Place of Business	Mailing Address
1133 LOUISIANA AVE. SUITE 210 WINTER PARK FL 32789	1133 LOUISIANA AVE. SUITE 210 WINTER PARK FL 32789

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

3. Date Incorporated or Qualified: **04/11/1994**

3a. Date of Last Report: **04/24/1995**

4. FEI Number: **59-3235969** ☐ 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

HELYER, NICK
1133 LOUISIANA AVE.
SUITE 210
WINTER PARK FL 32789

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	HELYER, NICK		1.2 NAME	
STREET ADDRESS	4111 CABRIELLA LANE		1.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER PARK FL		1.4 CITY-ST-ZIP	
TITLE	SV	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	ROWLEY, IAN		2.2 NAME	
STREET ADDRESS	1525 GRANVILLE DR.		2.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER PARK FL		2.4 CITY-ST-ZIP	
TITLE	TV	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	HOWELL, BRIAN		3.2 NAME	
STREET ADDRESS	3396 BURRAM PLACE		3.3 STREET ADDRESS	
CITY-ST-ZIP	CASSELBERRY FL		3.4 CITY-ST-ZIP	
TITLE	AT	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	SCHWANINGER, WILLIAM		4.2 NAME	
STREET ADDRESS	FT. LEE EXECUTIVE PARK		4.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LEE NJ		4.4 CITY-ST-ZIP	
TITLE	AS	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	TERRANELLA, FRANK		5.2 NAME	
STREET ADDRESS	FT. LEE EXECUTIVE PARK		5.3 STREET ADDRESS	
CITY-ST-ZIP	FT LEE NJ		5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-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 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: I. Rowley 4/23/96 407-647-8321
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)