

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 02, 2008 8:00 am
Secretary of State

05-02-2008 90175 036 ***150.00

DOCUMENT # P94000036608

1. Entity Name
S.J.D. TRANSPORT, INC.



Principal Place of Business
48 COPPER RIDGE AVE
LAKE PLACID, FL 33852 US

Mailing Address
732 WESTERN BLVD
LAKE PLACID, FL 33852-2322 US

40095164



01162008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3242072	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DEYOUNG, STEPHEN G
48 COPPER RIDGE AVE
LAKE PLACID, FL 33852

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	DPT
NAME	DEYOUNG, STEPHEN G
STREET ADDRESS	48 COPPER RIDGE AVE
CITY-ST-ZIP	LAKE PLACID, FL 33852

TITLE	VP
NAME	DEYOUNG, CURTIS J
STREET ADDRESS	732 WESTERN BLVD
CITY-ST-ZIP	LAKE PLACID, FL 33852

TITLE	VPS
NAME	DEYOUNG, JENNIFER
STREET ADDRESS	48 COPPER RIDGE AVE
CITY-ST-ZIP	LAKE PLACID, FL 33852

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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TITLE	
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STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Stephen G. DeYoung **Stephen G. DeYoung** April 30, 2008 (863) 465-7670
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #