FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000050112 (9) BONTRAGER HAULING, INC.

FILED Apr 07 1998 8:00am Secretary of State

Principal Place	e of Business	Mailing Address						
		4125 PRESCOTT STREET						
1 4125 PRESCOTT STREET 4125 PRESCOTT SARASOTA FL 34232 SARASOTA FL 3								
						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified		i
9 Principal D	lace of Rusiness	2a. Mailing Address				07/01/1994 4. FEI Number		
2. Principal Place of Business 2a. Mailing Addres 26			55			I		oplied For ot Applicable
Suite, Apt	#. etc.	Suite, Apt. #, etc.				65-0540846		Additional
22	27	, , , , , , , , , , , , , , , , , , ,			Certificate of Status Desired		equired	
City & State	6	City & State				6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution		to Fees
Zip Country		Zip	Z _I p Country			8. This corporation owes or has paid the		
24	25	29	30	,		Personal Property Tax due June 30.		No
	9. Name and Address of Curre	nt Registered Agent		641		10. Name and Address of New Register	d Agent	
BONTRAGER, SARAH				81	Name			
4125 PRESCOTT STREET SARASOTA FL 34232				82	Street Addr	dress (P.O. Box Number is Not Acceptable)		
				83	 			
				0.5				
				84	City		85 Zip	Code
11. Pursuant	to the provisions of Sections 607.050	12 and 607 1508. Florida Stat	utes the al	2016	a-named core			registered
office or r	egistered agent, or both, in the State	of Florida. Such change was	authorize	d by	the corporat	poration submits this statement for the purposition's board of directors. I hereby accept the a	ppointment as	registered
i -	rn tamiliar with, and accept the onlig	lations of, Section 607.0505, 1	-iorida Stat	utes	·.			,
SIGNATURE	Signature, typed or printed name of registered ag-	out and title it applicable (No	OTE Registere	d Age	ni signature requi	red when rainstating) DAT		
12.		D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS A		₹S IN 12
TITLE	D	☐ DELETE	ELETE 1.1 TO				☐ Change	Addition
NAME	Bontrager, Ernest		1.2 N/	ME				
STREET ADDRESS	4125 PRESCOTT STREET			REET	ADDRESS			
CITY-ST-ZIP	SARASOTA FL 34232			1.4 CITY-ST-ZIP				
TITLE		DELETE	2.1 71	TLE	ļ	*	Change	Addition
NAME			2.2 N	AME				j
STREET ADDRESS			2.3 \$1	REET	ADDRESS			
CITY-ST-ZIP				2 4 CITY+ST-ZIP			1 05	Adam
TITLE	1		3.1 TI				L. Change	☐ Addition
NAME			3.2 N/					
STREET ADDRESS					ADDRESS			
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NAME		LL DELETE	4.1 I) 4.2 N		}		المانان ب	Addition
					ADDRESS			
STREET ADDRESS								
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NAME		- DELETE	5.1 N		}		E Supugo	
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP					ı			
TITLE				5.4 CITY-ST-ZIP 5.1 TITLE			Change	Addition
NAME			6.2 NA					
STREET ADORESS					ADDRESS			
CITY-S1-7IP					1-7IP			

14. 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 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 altachment with an address.