

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P94000057615 (4)

1. Corporation Name

AMERICAN BULK TRANSPORT, INC.

Principal Place of Business

Mailing Address

7432 EAST HIGHWAY 50  
GROVELAND FL 34736

POST OFFICE BOX 428  
GROVELAND FL 34736

3. Date Incorporated or Qualified  
08/04/1994

3a. Date of Last Report  
04/04/1995

2. Principal Place of Business

2a. Mailing Address

21 15 Kissimmee Ave

26 P.O. Box 561079

4. FEI Number  
59-3258698

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 PL

23 Ocoee, FL

28 Orlando, FL

24 34761 USA

29 32856 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LANGLEY, RICHARD H ESO  
700 ALMOND STREET  
CLERMONT FL 34712

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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  
NAME LANGLEY, A E  
STREET ADDRESS 1831 BETT MAR LANE  
CITY - ST - ZIP WINTER PARK FL

☐ DELETE

11 TITLE  
12 NAME  
13 STREET ADDRESS  
14 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE VD  
NAME CRITTENDEN, EARL M  
STREET ADDRESS 1023 PINAR DRIVE  
CITY - ST - ZIP ORLANDO FL 32825

☐ DELETE

21 TITLE  
22 NAME  
23 STREET ADDRESS  
24 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE SD  
NAME MOORE, WILLIAM O  
STREET ADDRESS 13146 CASPER LANE  
CITY - ST - ZIP CLERMONT FL 34711

☐ DELETE

31 TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE D  
NAME STEGALL, JERRY  
STREET ADDRESS 11569 COUNTY ROAD STE. 209  
CITY - ST - ZIP OXFORD FL 34484

☐ DELETE

41 TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE TD  
NAME SCHUUR, HARRY J. I  
STREET ADDRESS 3226 DEBBIE DRIVE  
CITY - ST - ZIP ORLANDO FL

☐ DELETE

51 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY - ST - ZIP

☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY - ST - ZIP

☐ Change ☐ Addition

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 included 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Harry J. Schuur, III

7-16-96

407/877-2455

CR2E034 (3/96)