

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

SEP 11 1995

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000068895 (9)

1. Corporation Name

POLLOCK TRANSPORTATION SERVICES, INC.

Principal Place of Business

6222 DURANT RD
DURANT FL 33530

Mailing Address

P.O. BOX 2097
VALRICO FL 33594

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/06/1994

3a. Date of Last Report

NA

2. Principal Place of Business

21

2a. Mailing Address

26

4. FEI Number

59-3268401

Applied For

Not Applicable

Suite, Apt. #, etc.

22

Suite, Apt. #, etc.

27

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

23

City & State

28

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Zip

24

Country

25

Zip

29

Country

30

8. This corporation has liability for intangible tax under S. 190.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

POLLOCK, BRADLEY W
1807 LAUREL OAK DR.
VALRICO FL 33594

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

(Signature of a principal officer, registered agent, and the incorporator)

(Name of Registered Agent (signature required after recording))

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

D
POLLOCK, BRADLEY W
6222 DURANT RD.
DURANT FL 33530

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

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NAME

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CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 NAME

☐ Change ☐ Addition

2 NAME

3 STREET ADDRESS

4 CITY, ST, ZIP

5 NAME

6 NAME

7 STREET ADDRESS

8 CITY, ST, ZIP

9 NAME

10 NAME

11 STREET ADDRESS

12 CITY, ST, ZIP

13 NAME

14 NAME

15 STREET ADDRESS

16 CITY, ST, ZIP

17 NAME

18 NAME

19 STREET ADDRESS

20 CITY, ST, ZIP

21 NAME

22 NAME

23 STREET ADDRESS

24 CITY, ST, ZIP

25 NAME

26 NAME

27 STREET ADDRESS

28 CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and that it fully qualifies for the exemption stated in Section 119.02(3)(b), Florida Statutes. I further certify that the information indicated on the 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 appointed 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: *Bradley W Pollock* Bradley W Pollock
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-27-95
DATE

813-689-2589
(Call for the fee)