

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY -1 AM 9:32

DOCUMENT # P94000075532 (9)

1. Corporation Name

CAMPBELL BUSSES, INC.

Principal Place of Business

8925 DEVONSHIRE BLVD
JACKSONVILLE FL 32209

Mailing Address

8925 DEVONSHIRE BLVD
JACKSONVILLE FL 32209

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

10/12/1994

3a. Date of Last Report

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

4. FBI Number

59-3283193

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

CAMPBELL, RHONNIE
8925 DEVONSHIRE BLVD
JACKSONVILLE FL 32209

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, typed or printed name of registered agent and the if applicable)

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PRESIDENT
NAME	EUGENE CAMPBELL
STREET ADDRESS	8925 DEVONSHIRE BLVD
CITY - ST - ZIP	JACKSONVILLE, FL 32209
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
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. TITLE	SECRETARY/TREASURER	☐ Change ☐ Addition
2. NAME	RHONNIE CAMPBELL	
3. STREET ADDRESS	8925 DEVONSHIRE BLVD	
4. CITY - ST - ZIP	JACKSONVILLE, FL 32209	☐ Change ☐ Addition
5. TITLE		
6. NAME		
7. STREET ADDRESS		
8. CITY - ST - ZIP		☐ Change ☐ Addition
9. TITLE		
10. NAME		
11. STREET ADDRESS		
12. CITY - ST - ZIP		☐ Change ☐ Addition
13. TITLE		
14. NAME		
15. STREET ADDRESS		
16. CITY - ST - ZIP		☐ Change ☐ Addition

REMITTED BY MAY 1

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: Eugene Campbell, Campbell Busses, Inc. 4-20-95 (904) 7654676

(Signature and typed or printed name of signing officer or director)