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PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Socretary of State
DIVISION OF CORPORATIONS

FILED

May 13 1997 8:00am

Secretary of State

DOCUMENT # P94000082456 (2)

R.C. PITTMAN TRUCKING, INC.

Principal Place of Business Mailing Address 5970 COLTER RD. 5970 COLTER RD. MILTON FL 32583-2834 MILTON FL 32583 3a. Date of Last Report 3. Date Incorporated or Qualified 11/08/1994 06/11/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3298513 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution  $\Box$ Added to Fees Zip Country Country Zin 8. This corporation has liability for intangible tax under s. 199.032, X No 24 25 29 Florida Statutes Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 PITTMAN, RONALD C 5970 COLTER RD. 82 Street Address (P.O. Box Number is Not Acceptable) MILTON FL 32583 83 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 reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. 🔲 DELETË Change Addition TITLE 11 TITLE PITTMAN, RONALD C NAME 1.2 NAME 5970 COLTER RD. STREET ADDRESS 1.8 STREET ADDRESS MILTON FL 32583 CITY-ST-ZIP 1.4 CITY-S1-7IP DELETE Change DST Addition TITLE 2.1 THLE PITTMAN, BELINDA L NAME 2.2 NAME 5970 COLTER RD. STREET ADDRESS 2.8 STHELL ADDRESS MILTON FL 32583 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 THUE NAME STREET ADDRESS 3.8 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-7IP DELFTE Change Addition TITLE 4.1 THEF NAME 4. 2 NAME STREET ADDRESS 4.8 STREET ADDRESS CITY-ST-ZIP 4.4 Ch Y - S1 - ZIP DELETE ☐ Change Addition 5 i IIILE NAME 5.2 NAME STREET ADDRESS 5.8 STREET ADDRESS CITY-ST-ZIP 5.4 CHY-S1-ZIP DELETE. Change Addition TITLE 6.1 THLE NAME 6.2 NAME STREET ADDRESS 6.8 STREET ADDRESS

14. I do 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 logal effect as if made under oath; that I am an officer or directes of the corporation or the receiver of that my name.

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