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

PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STA

Sandra B. Mortham

FILED

May 14 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000090895 (1)

FLORIDA EXPRESS DELIVERY SERVICE, INC.

Principal Place of Business		Mailing Address	Mailing Address			T SANTENDE AIN INTIL MINIT BALLE MAIL AND IN NOVEL DRIPE TOLET NOVEL TOLET BALLE (MAIL		
2340 COOLIDGE AVE ORLANDO FL 32804 US		2340 COOLIDGE AVE ORLANDO FL 32804-4810 US						
				3. Date Incorporated or Qualified 12/14/1994	3a. Date of L 06/20/19	•		
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	1 20/20/10	Applied For	
ו		26				Not Applicable		
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			□ \$8.	75 Additional		
		27			5. Certificate of Status Desired		ee Required	
City & Stal	te	City & State			6. Election Campaign Financing	· ,	.00 May Be	
]	0	28			Trust Fund Contribution		dded to Fees	
Zip 1	Country	Zip	Cou	intry	8. This corporation has liability for it		der s. 199.032,	
	9. Name and Address of Currer		30	I		Yes No		
				81 Name	10. Name and Address of New Reg	listeled Agent		
Y11	O BENNETT ROAD 1340 ANDO FL 32803 ORLAN	OU FOR SNIDER COULDSE AUE UPO FL 3280	4	2340	der Jayna Gaye dress (PO Box Number is Not Acceptab O Coolidge Ave			
				64 City Orla	indo	FL 85	Zip Code 32804	
1. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statute	es, the al	bove-named co	prporation submits this statement for the p		ging its registere	
agent. I a	registered agent, or both, in the State am familiar with, and accept the oblig	rot Florida. Such change was a ations of, Section 607.0505. Flo	iutnorize rida Stat	a by the corpai lules.	orporation submits this statement for the p ration's board of directors. I hereby accep	t the appointme	nt as registered	
	Made 1 5 NIO Signature, typed of printed name of registered age			d Agent signature red	J. Smith Cito V	-/5/97 DATE	7	
2.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRE	CTORS IN 12	
ITLE	PTD	☐ DELETE	1.1 T)	TLE		☐ Ch	ange 🔲 Additio	
AME	SNIDER, JAYNE G.		1.2 N	AME				
TREET ADORESS	8808 N. CENTRAL AVE., SUITI	Ē 108	1.3 S	IREET ADDRESS				
ITY-ST-ZIP	PHOENIX AZ		1.4 CI	TY-ST-ZIP				
ITLE	VP .	X DELETE	2 1 TI	TLF	•	⊊ Ch	ange 🔲 Additio	
IAME	BULMAN, STEVE E		2.2 N	AME .	VP			
STREET ADDRESS	1110 BENNEFT ROAD		2.3 \$	TREE1 ADDRESS	Alice Doughty			
CITY-ST-ZIP	ORLANDO FL		240	HY-ST-ZIP	8808 N Cemtral Ave, F	hoenix,	AZ 85068	
ITLE	S	DELETE	311			☐ Ch		
IAME	DOUGHTY, ALICE		3 2 N	AME				
TREET ADDRESS	8808 N. CENTRAL AVE., SUITI	E 108	3 9 ST	IREET ADDRESS				
CITY-ST-ZIP	PHOENIX AZ		3 4 . C	ITY-ST-7IP				
TITLE	D	DELETE	4.1 11			Ch	ange 🔲 Additio	
IAME	SNIDER, MOODY L.		4 2 N	IAME				
TREET ADDRESS	8808 N. CENTRAL AVE., SUITI	E 108		REET ADDRESS				
CITY-ST-ZIP	PHOENIX AZ	- 178	1	TY-ST-ZIP				
ITLE	1 119 101 111 1 110	DELETE	5.1 TI		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	☐ Ch	ange Additio	
IAME			5.2 N					
TREET ADDRESS			1	IREET ADDRESS				
OTY-ST-ZIP				TY-ST-ZIP				
ITLE		DELETE	6170		The state of the s	☐ Ch	ange Additio	
IAME		[Dreet				L (11)	ungo LJ MUDICIU	
			6.2 N/					
Street address			■ 63 S1	IREET 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 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.