

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P95000005638 (8)**

1. Corporation Name

TRANSPORT STRATEGIES, INC.



Principal Place of Business

**11871 CATRAKEE DRIVE
JACKSONVILLE FL 32223**

Mailing Address

**11871 CATRAKEE DRIVE
JACKSONVILLE FL 32223**

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

9. Name and Address of Current Registered Agent

**F & L CORP.
200 LAURA STREET
JACKSONVILLE FL 32202**

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

01/20/1995

3a. Date of Last Report

4. FEI Number

59-3292940

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

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 607.05(2) and 607.15(3), 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 607.05(2), Florida Statutes.

SIGNATURE

Signature (Must be printed and signed by the registered agent or the corporation's board of directors)

Printed Name (Must be printed and signed by the registered agent or the corporation's board of directors)

Date

12. OFFICERS AND DIRECTORS

TITLE

D

☐ DELETE

NAME

**SAIN, BERNARD S
11871 CATRAKEE DRIVE
JACKSONVILLE FL 32223**

STREET ADDRESS

CITY-STATE-ZIP

TITLE

D

☐ DELETE

NAME

**PATCH, GLENN R
11871 CATRAKEE DRIVE
JACKSONVILLE FL 32223**

STREET ADDRESS

CITY-STATE-ZIP

TITLE

D

☐ DELETE

NAME

**LEGLER, MITCHELL W
200 LAURA STREET
JACKSONVILLE FL 32202**

STREET ADDRESS

CITY-STATE-ZIP

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