

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000015492 (8)

1. Corporation Name
TDT LOGISTICS, INC.



Principal Place of Business

100 E. MAIN STREET
LAKELAND FL 33801

Mailing Address

POST OFFICE BOX 24628
LAKELAND FL 33802

3. Date Incorporated or Qualified
02/23/1995

3a. Date of Last Report

2. Principal Place of Business

21 Rt. 10, Box 319

Suite, Apt. #, etc.

22

City & State

23 Lake City, FL 32025

Zip

24 32025

Country

25 Columbia

2a. Mailing Address

26 Rt. 10, Box 319

Suite, Apt. #, etc.

27

City & State

28 Lake City, FL 32025

Zip

29 32025

Country

30 Columbia

4. FEI Number

59-3306356

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

9. Name and Address of Current Registered Agent

JOHNSON, DENNIS P
100 EAST MAIN STREET
LAKELAND FL 33801

10. Name and Address of New Registered Agent

81 Name

N. TERRY DICKS

82 Street Address (P.O. Box Number is Not Acceptable)

RT 10, BOX 319

83

84 City

LAKE CITY,

FL

85 Zip Code

32025

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)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
JOHNSON, DENNIS P
100 E. MAIN STREET
LAKELAND FL 33801 ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

TITLE
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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
PRESIDENT
N. TERRY DICKS
RT 10, BOX 319
LAKE CITY, FL 32025 ☐ Change ☒ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
VICE-PRESIDENT
CLINTON DICKS
RT 10, BOX 319
LAKE CITY, FL 32025 ☐ Change ☒ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
☐ Change ☐ Addition

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:

Clinton Dicks V.P.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/30/96

(904) 752-1093

Daytime Phone #

CR2E034 (12/95)