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

PROFIT CORPORATION ANNUAL REPORT

1996

GAINESVILLE FL 32609



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

GAINESVILLE FL 32609

DOCUMENT # P95000030258 (4)

CRAWFORD TRUCKING, INC.

12516 N.W. COUNTRY ROAD 231	12516 N.W. COUNTRY ROAD 231
Principal Place of Business	Mailing Address



					3. Date Incorporated or Qualified 3a. Date of Last Report 04/11/1995				
<u>⊢≕</u> _ ' .	Principal Place of Business 2a. Mailing Address				4. FEI Number			Applied For	
21 Brech		, EL. 26 P.C. Ber 238						Not Applicable	
Suite, Apt.	U/A	Suite Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State  23 Broce	K. E.	City & State  28 Bracker, FL.		Election Campaign Financing     Trust Fund Contribution		<b>\$5.00</b> May Be Added to Fees			
					8. This corporation has liability for intangible tax under s 199 032, Florida Statutes  No				
	g. Name and Address of Current	Registered Agent		1	10. Name and Address of New	Registered A	gent		
			81	Name					
CRAWFORD, LARRY L 12516 N.W. COUNTRY ROAD 231			82	82 Street Address (P.O. Box Number is Not Acceptable)					
	VILLE FL 32609		83						
			84	City		FI	<b>85</b> Zi	p Code	
SIGNATURE	to the provisions of Sections 607.0502 a ed agent, or both, in the State of Florida th, and accept the obligations of, Section Signature transfor printed name of registered agent as	1 607.0505, Florida Statules.			ration submits this statement for the purid of directors. I hereby accept the app	urpose of chan pointment as re	ging its i egistered	registered office I agent. I am	
12.	OFFICERS AND		13.	1 Signature respons	ADDITIONS/CHANGES TO OF		NOE OZC	DC IN 10	
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CITY-ST-ZIP			6.4 CITY - S	1 - Z-P				i	
	vicertify that the information supplied wit	Littus filma is voluntarly forms			or the execution stated in Section 110	07/0/L) Else:	do Chotal		

• To meeting the information supplied wor this arrived and does not quality for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further certify that the information indicated on this arrival report or supplemental annual report or true and accurate and that my signature shall have the same logal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trusted expowered 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 or an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JA 12 12 12 1

904-485-1555