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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # P95000042513 (8)

DONNELL TRANSPORTATION INC

DONNELL TRANSPORTA		
Principal Place of Business	Mailing Address	() Addisadi din Balai Askis Addi
3407 NEEDLES DR. ORLANDO FL 32810	3407 NEEDLES DR. Orlando Fl 32810	

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						3. Date incorporated 06/01/1995		3a. Date of Las	t Report
2. Principal Pia	ace of Business	2a. Mailing Address				4. FEI Number	23197	3)	Applied For
1		26				27-	30100	ן טכ	Not Applicable
Suite, Apt. #	#, el c.	Suite, Apt. #, etc.				5. Certificate of State	us Desired		75 Additional se Required
City & State		City & State				6. Election Campaig	n Financing	_ \$5	.00 May Be
1		28				Trust Fund Contri			ided to Fees
.μ	Country	Zφ	Cou	ntry		8. This corporation h			rs 199.032,
	25	29	30			Florida Statutes	Yes		
1	9. Name and Address of Currer	it Registered Agent				10. Name and Addr	ess of New R	egistered Agent	
				81 N	anne				
MARCH	iand, agnes l			82 S	rcat Addre	ss (P.O. Box Number is	Not Acceptable	le)	
3407 NEEDLES DR.			02 3	icot Addito	33 (, , , , , , , , , , , , , , , , , , , ,			
	DO FL 32810			83					
UNLAN	DO PL 32010			L					
				84 C	ty			E 85	Zip Code
.,	to the provisions of Sections 607.0502	007 1500 Florido Oto	tutos the she	<u> </u>	nd corpora	tion submits this staten	ent for the our	pose of changing	its registered offic
tamiliar wi IGNATHRE	to the provisions of Sections 607.0502 ed agent, or both, in the State of Flori th, and accept the obligations of, Sect Styrutzir spect or printed name of registered agen	ion 607.0505, Fiorida Statu	(NOTE: Registered					CATE	
2.		D DIRECTORS	13.				NGES TO OFF	ICERS AND DIREC	OTORS IN 12
 :	President	DELETE	111	ITLE				Char	nge 🔲 Addition
AME		_	12 N	AME	1				
	Joseph O'Donnell			TREET ADO	RESS				
TREET ADDRESS	3407 Needles Dri			11Y-ST-ZI					
HY - 51 - Z0P	Orlando, Florida	32010	2 11					☐ Chai	nge
lLi	Vice President,		2 2 N		1				2
AME	Agnes L. Marchan				DI ĈE				
IPEET ADDRESS	3407 Needles Dri	ve			DDRESS				
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14. To hereby certry that the information supplied with this singly is votoritally furthered and obesine desired to execute 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 certify 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/15/96 (407)299-6358