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Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

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appears in Block 12 or

CITY - \$1 - ZIF



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

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May 02 1997 8:00am

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DIVISION OF CORPORATIONS

DOCUMENT # P95000067566 (6)

TRANSPORTATION SERVICES CONSULTING, INC.

1923 SOUTH CREEK BOULEVARD 1923 SOUTH CREEK BOULEVARD DAYTONA BEACH FL 32124-6864 DAYTONA BEACH FL 32124 3a. Date of Last Report 3. Date Incorporated or Qualified 08/31/1995 05/01/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-3333442 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Tes No 30 Florida Statutes 25 29 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent ₿1 Name **BOLT. SPENCE & HALL. P.A.** 221 N CAUSEWAY Street Address (P.O. Box Number is Not Acceptable) **NEW SMYRNA BEACH FL 32169** 83 City Zip Code 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. Landamylia, with, and accept the obligation of Section 507.0505, Florida Statutes. SIGNATUR (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)12. OFFICERS AND DIRECTORS 13. PSTD DELETE Change Addition THE 1.1 TITLE KOHLER, CHARLES A hAM* 1.2 NAME 1923 SOUTH CREEK BOULEVARD 1.3 STREET ADDRESS STREET 400FESS **DAYTONA BEACH FL 32124** 1.4 CITY - ST-ZIP CUY-S1-7IP DELETE ☐ Change Addition 2.1 TITLE THEF NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CHY+ST-20 DELETE Change Addition ₩.E 3.1 TITLE 3.2 NAME N.M. STREET ADDRESS 3.3 STREET ADDRESS CHY+ST- ZIP 3.4. CHTY-ST-ZIP ___ DELETE Change Addition 4.1 TITLE THEF 4 2 NAME N4M 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP City - ST - ZiP DELETE Change Addition 5.1 TITLE $\Pi^*\Pi$ 5.2 NAME NAME 5.3 STREET ADDRESS STREET ACCRESS 5.4 CITY-ST-ZIP 011Y-\$1-7H DELETE ☐ Addition Change THE 6.1 TITLE 6.2 NAME NAME

> **6.3 STREET ADDRESS** 6.4 CITY - ST - ZIP

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 inclicated 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

Min an address