

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000083447

1. Corporation Name

PHILIP STRUTHERS TRUCKING, INC.

Principal Place of Business

**1338 EMILY COURT
CLEARWATER FL 34616-3505**

Mailing Address

**1338 EMILY COURT
CLEARWATER FL 34616-3505**

FILED
Mar 10, 1999 8:00 am
Secretary of State

03-10-1999 90038 011 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/01/1995

4. FEI Number

59-3342540

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 owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

21 2545 N.E. COACHMAN Rd

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 #195

Suite, Apt. #, etc.

City & State

23 CLEARWATER, FL

City & State

Zip

Country

24 33765

Zip

25

Country

26

27

Country

9. Name and Address of Current Registered Agent

**STRUTHERS, PHILIP S
1338 EMILY COURT
CLEARWATER FL 34616-3505**

10. Name and Address of New Registered Agent

81 Name

STRUTHERS, PHILIP S

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

2545 N.E. COACHMAN Rd. #195

83

84 City

CLEARWATER

FL

85 Zip Code

33765

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

Philip S. Struthers

Signature, typed or printed name of registered agent and title if applicable.

PRES

1/20/99

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE

NAME **STRUTHERS, PHILIP S**

STREET ADDRESS **1338 EMILY COURT**

CITY-ST-ZIP **CLEARWATER FL 34616-3505**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PRES.** ☒ Change ☐ Addition

1.2 NAME **PHILIP S STRUTHERS**

1.3 STREET ADDRESS **2545 NE COACHMAN Rd #195**

1.4 CITY-ST-ZIP **CLEARWATER, FL 33765**

2.1 TITLE **VIC. PRES** ☐ Change ☒ Addition

2.2 NAME **RONNIE W. AMERSON**

2.3 STREET ADDRESS **8515 BAYSHORE Rd. Lot 167**

2.4 CITY-ST-ZIP **PALMETTO FL 34221**

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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 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, with all other like empowered.

SIGNATURE:

Philip S. Struthers

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

YRES. 1/20/99 (727) 724-1737

Date

Daytime Phone #

CR2E034 (1/98)