

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000085143 (2)

1. Corporation Name

FERRELL TRAVEL & LIMO SERVICE, INC.



Principal Place of Business

4655 SALISBURY ROAD STE 390
JACKSONVILLE FL 32256

Mailing Address

4655 SALISBURY ROAD STE 390
JACKSONVILLE FL 32256

3. Date Incorporated or Qualified
11/01/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 6026 San Jose Blvd
Suite, Apt. #, etc.

26 10151 Deerwood Pk. Blvd.
Suite, Apt. #, etc.

4. FEI Number
59-3345647

Applied For
Not Applicable

22 City & State
Jacksonville FL

27 Bldg 100 Suite 200
City & State
Jacksonville FL

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

23 Zip
32217

Country

28 Zip
32256

Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DILLINGHAM, PHILLIP I
4655 SALISBURY ROAD STE 390
JACKSONVILLE FL 32256

81 Name

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

10151 Deerwood Park Blvd. Bldg 100

83

Suite 200

84

City Jacksonville

FL

85 Zip Code

32256

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 the date

Signature, typed or printed name of registered agent and the date

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
DILLINGHAM, PHILLIP I
STREET ADDRESS
4655 SALISBURY ROAD STE 390
CITY-ST-ZIP
JACKSONVILLE FL 32256

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE DPST
12 NAME R. Ernest Ferrell, Jr.
13 STREET ADDRESS 4120 Salisbury Rd Suite 1100
14 CITY-ST-ZIP Jacksonville FL 32216

☐ Change ☒ Addition

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

☐ Change ☐ Addition

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

☐ Change ☐ Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

☐ Change ☐ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

☐ Change ☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 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, upon an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

R. Ernest Ferrell, Jr.

APR 29 1996

R. Ernest Ferrell, Jr. M.N. President (904-296-1155)

CR2E034 (12/95)