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Apr 27, 1999 8:00 am
Secretary of State

04-27-1999 90016 037 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # P95000097934

1. Corporation Name
FLG CARTAGE, INC.

Principal Place of Business
10651 SATELLITE BLVD.
ORLANDO FL 32837

Mailing Address
10651 SATELLITE BLVD.
ORLANDO FL 32837

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/29/1995

4. FEI Number

59-3349906

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 1902 Cypress Lake Dr.

Suite, Apt. #, etc.

22 200

City & State

23 Orlando, FL

Zip Country

24 32837 25 Orange

2a. Mailing Address

26 P.O. Box 620543

Suite, Apt. #, etc.

27

City & State

28 Orlando, FL

Zip Country

29 32862 30

9. Name and Address of Current Registered Agent

HICKS, WOODY M
10651 SATELLITE BLVD.
ORLANDO FL 32837

10. Name and Address of New Registered Agent

81 Name

Don C. Carey

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

1994 Palmer Dr.

83

84 City

Melbourne

FL

85 Zip Code

32935

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME HICKS, WOODY
STREET ADDRESS 1504 OBERLIN TERRACE
CITY-ST-ZIP LAKE MARY FL 32746

☒ DELETE

TITLE VP
NAME JORDAN, JOHN
STREET ADDRESS 5316 MILLSTREAM DRIVE
CITY-ST-ZIP ST CLOUD FL 34771

☐ DELETE

TITLE T
NAME CAREY, DON C
STREET ADDRESS 1994 PALMER DRIVE
CITY-ST-ZIP MELBOURNE FL 32935

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOHN JORDAN

4/21/99

Date

407 438 5499

Daytime Phone #

CR2E034 (11/98)