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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P96000070051 (3)

MARINER VANS & TRUCKS, INC.

FILED Mar 04 1998 8:00am Secretary of State



| Principal Place of Business Mailing Address | | | | | | I 188011801 316 18110 BIVIL BBXX BDXX BD | iki dokir kodik dokir bokok oliqi ildi kodi | | |
|--|--|------------------|--------------|-----------------|-------------------------|---|---|---|--|
| 2372 DAVIS BOULEVARD 2372 DAVIS BOULEVARD NAPLES FL 33962 NAPLES FL 33962 | | | | | | | DO NOT WRITE | E IN THIS SPACE | |
| | | | | | | | 3. Date incorporated or Qualified | | |
| | | | | | | | 08/22/1996 | | |
| | | | | Mailing Address | | | 4. FEI Number | Applied For | |
| 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. | | | | | | | 65-0700290 | Not Applicable | |
| 22 | #, 0 10. | 27 Suite, Apt. | | | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required | | |
| City & State | 9 | City & Stat | City & State | | | 6. Election Campaign Financing | \$5.00 May Be | | |
| 23 | | | 28 | | | | Trust Fund Contribution | Added to Fees | |
| Zip | | | | Countr | y | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No | | | |
| 24 25 29 30 9, Name and Address of Current Registered Agent | | | | | | | Personal Property Tax due June 10. Name and Address of New Re | | |
| | | | | | | Name | 10, Hallo alla Abalosa al Hon Ho | gistorio e Agorit | |
| LARSON, KAREN A 993 NORTH COLLIER BOULEVARD | | | | | | | | | |
| MARCO ISLAND FL 34146 | | | | | | Street Add | pet Address (P.O. Box Number is Not Acceptable) | | |
| | 100 1004 | 10 1 5 0 7 1 7 0 | | | 83 | | | | |
| | | | | | 84 | City | | 85 Zip Code | |
| | | | | | | , | | | |
| Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the at office or registered agent, or both, in the State of Florida. Such change was authorized agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Stat | | | | | | y the corpor. | rporation submits this statement for the pation's board of directors. I hereby accept | ourpose of changing its registered of the appointment as registered | |
| SIGNATURE | | | | | | | | | |
| Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered A | | | | | | ent signature req | uired when reinstating) | DATE | |
| 12. | D) (D) | OFFICERS ANI | | DELETE | 13. | | ADDITIONS/CHANGES TO OFFIC | CERS AND DIRECTORS IN 12 Change | |
| TITLE Name | PVD | I DOPEDT I | U | ULLLIE | 1.1 TITLE 1.2 NAME | ŀ | | Change | |
| | NAME RUSSELL, ROBERT L STREET ADDRESS 2372 DAVIS BOULEVARD | | | | | T ADDRESS | | | |
| CITY-ST-ZIP | ALADI PO PI, ARAGA | | | | | | | | |
| TITLE | STD | 1 L 33802 | | DELETE | 1.4 CITY - 2.1 TITLE | 51-2ir | | Change Addition | |
| NAME | | L, LINDA L | _ | | 2.2 NAME | | | | |
| STREET ADDRESS | | MS BOULEVARD | | | | T ADDRESS | | | |
| CITY-ST-ZIP | ALAMA MA MI AAAAA | | | | | ST-ZIP | + P | | |
| TITLE | | | | DELETE | 3.1 TITLE | | | Change Addition | |
| NAME | | | | | 3.2 NAME | | | | |
| STREET ADDRESS | | | | | 3.3 STREE | T ADDRESS | | | |
| CITY-ST-ZIP | | | | | 3.4. CITY- | ST-ZIP | | | |
| TITLE | | | Ц | DELETE | 4.1 TITLE | | | L Change L Addition | |
| NAME | | | | | 4. 2 NAME | | | | |
| STREET ADDRESS | | | | | | ADDRESS | | | |
| CITY-ST-ZIP | - , | | | DELETE | 4.4 CITY - | ST- ZIP | | Change Addition | |
| TITLE NAME | | | L J | טנננונ | 5.1 TITLE | | | Change 1 Addition | |
| | | | | | 5.2 NAME | r ADODESE | | | |
| STREET ADDRESS CITY-ST-ZIP | | | | | 5.3 STREE | ADDRESS | | | |
| TITLE | | | П | DELETE | 6.1 TITLE | 31-5K | | ☐ Change ☐ Addition | |
| NAME | | | | | 6.2 NAME | | | | |
| STREET ADDRESS | | | | | | ADDRESS | | | |
| CITY-ST-ZIP | | | | | 6.4 CITY- | | | | |
| · | | | | | | | | — | |

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 turstee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 12 if changed, or on an arganization with an address.