

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 02, 2002 8:00 am
Secretary of State

06-02-2002 90906 013 ***158.75

DOCUMENT # **P96000071261**

1. Entity Name

Brock's Trucking, Inc.

DO NOT WRITE IN THIS SPACE

674538

2. Principal Place of Business

2220 Glory Rd

3. Mailing Address

2220 Glory Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Quincy, FL

City & State

Quincy, FL

4. FEI Number

593423140

Applied For

Not Applicable

Zip

Country

32352

Gadsden

Zip

Country

32352

Gadsden

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

Harold S. Richmond

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

227 E. Jefferson St

City

Quincy,

FL

Zip Code

32351

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES. DAVID L. BROCK 2220 Glory Rd Quincy, FL 32352
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V.P. JANE Z. BROCK 2220 Glory Rd Quincy, FL 32352
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IN THIS SPACE**

13. 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 report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jane Z. Brock

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/27/02 850-856-5294

Date

Daytime Phone #

CR2E034B (12/01)