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

Apr 23 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P96000091969 (1) J & L HAULING SERVICE, INC. Principal Place of Business Mailing Address 8719 SALAMANCA CT **B719 SALAMANCA CT** TALLAHASSEE FL 32311 TALLAHASSEE FL 32311 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/07/1996 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 21 59-3413030 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible **⊠** No Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent BUSH, LARRY K 81 Name **8719 SALAMANCA COURT** Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32311 83 84 City Zip Code 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, typied or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change Addition BUSH, LARRY K NAME 1.2 NAME 8719 SALAMANCA CT STREET ADDRESS 1.3 STREET ADDRESS TALLAHASSEE FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change 2.1 TITLE TITLE CLAYTON, TRAVIS NAME 2.2 NAME RT 3 BOX 375

5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 6 1 TITLE Change Addition TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-2IP

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**5.3 STREET ADDRESS** 

4.4 CITY-ST-ZIP

2. 4 CITY-ST-ZIP

3 1 TITLE

3.2 NAME

4.1 TITLE 4. 2 NAME

5.1 TITLE

5.2 NAME

DELETE

DELETE

DELETE

14. 1 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.

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS CITY - ST - ZIP

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE

NAME

HAVANA FL

- Bush, PRES.

(850) 871-3653

FILED

CR2E034 (10/97

Addition

Addition

Addition

Addition

☐ Change

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Change