

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED

97 AUG 13 AM 8:24

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P96000102801 (3)

1. Corporation Name

BOWSER TRANSPORTATION CO., INC.



Principal Place of Business

8720 SOMERS RD
JACKSONVILLE FL 32226

Mailing Address

8720 SOMERS RD
JACKSONVILLE FL 32226-2638

3. Date Incorporated or Qualified

12/18/1996

3a. Date of Last Report

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

30

4. FEI Number

X 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 has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

BOWSER, H R JR
8720 SOMERS RD
JACKSONVILLE FL 32226

10. Name and Address of New Registered Agent

81 Name
Sol Proctor, Attorney at Law
82 Street Address (P.O. Box Number is Not Acceptable)
233 East Bay Street
83 1015 Blackstone Building
84 City
Jacksonville FL 85 Zip Code
32202

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 607.0545, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

7-30-97

12. OFFICERS AND DIRECTORS

TITLE P/S

NAME Bowser, H.R. Jr.
STREET ADDRESS 8720 Somers Road
CITY-ST-ZIP Jacksonville, FL 32226

TITLE V

NAME Kimes, Dondi
STREET ADDRESS 8720 Somers Road
CITY-ST-ZIP Jacksonville, FL 32226

TITLE T

NAME Moore, Bill
STREET ADDRESS 8720 Somers Road
CITY-ST-ZIP Jacksonville, FL 32226

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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, or on an attachment with an address.

SIGNATURE

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

7/18/97 (904) 757-6008

CR2E034 (9/96)