## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

## P97000014495 **DOCUMENT #**

1. Entity Name

GRANTHAM TRUCKING, INC.



## **FILED** Apr 28, 2003 8:00 am Secretary of State

04-28-2003 91290 024 \*\*\*150.00

Principal Place of Business 205 SW 4TH STREET JASPER FL 32052			Mailing Address P O BOX 207 JASPER FL 32052				- 		
2. Principal Place of Business			3. Mailing Address				<b>jş</b> iii: <b>01:0</b> , 1:0:1 <b>0 </b> 41: <b>1</b>		
Suite, Apt.	#, etc.	Suit	Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES			
City & State	e	City	City & State			4. FEI Number 59-3430901 Applied For Not Applicable		Applied For Not Applicable	
Zip Country			Country		5.	Certificate of Status Desired   \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent				
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FOLSOM, LYNDA 548 CHANBRIDGES ROAD				Street A	Street Address (P.O. Box Number is Not Acceptable)				
JASPER FL 32052									
				City			FL Zip C	ode	
	named entity submits this sions of registered agent.	statement for the purp	pose of changing its r	registered office or	registered a	agent, or both, in the State of Florid	a. I am familiar wi	ith, and accept	
SIGNAT/JRE _	Signature, typed or printed name of re	egistered agent and title it ap	olicable. (NOTE:	Registered Agent signat	ure required when	reinstating)	DATE		
FILE NOW!!! FEE IS \$150.00 After May 1; 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State						Election Campaign Finar Trust Fund Contribution.	~ _ **	5.00 May Be Ided to Fees	
10. OFFICERS AND DIRECTORS 11					Δ	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECT	OBS IN 11	
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Increby certify that the information supplied with this filling 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 10 or Block 11 if changed, or on an attachen (Director

SIGNATURE: