FILE NOW: FILING FEE AFTER MAY 1ST IS

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTME

Secretary of

0.00

F STATE

DIVISION OF CORP ATIONS

1998

DOCUMENT # P97000076150 (6)

R & D TRANSPORT, INC.

Principal Place of Business

Mailing Address

1357 S HANKIN RD

FILED Feb 16 1998 8:00am Secretary of State



BARTON FL 33830		BARTOW FL 33830				DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						08/28/1997
2. Principal P	lace of Business	2a, Mailing Address	2a. Mailing Address			4. FEI Number . Applied For
21		26	26			59-3470/86 Not Applicable
Sulte, Apt.	#, etc.	Suite, Apl. #, etc.	Suite, Apl. #, etc.			5. Certificate of Status Desired S8.75 Additional
22		27				Fee Required
City & State	e	City & State	¬ '			6. Election Campaign Financing \$5.00 May Be
23			28			Trust Fund Contribution
Zip Country		<u> </u>	Zip Country			8. This corporation owes or has paid the current year Intangible
24	25 29 30 9. Name and Address of Current Registered Agent					Personal Property Tax due June 30. X Yes No
				10. Name and Address of New Registered Agent		
PLEMMONS, RICHARD V				•	1491119	
	7 S HANKIN RD		82 Street Ad		Street /	Address (P.O. Box Number is Not Acceptable)
BAI	RTOW FL 33830			83		
				63		!
				84	City	85 Zip Code
11 Pursuant	to the provisions of Spetions 607	0502 and 607 1509 Florida Stat	tutos the ph	20140	namad	Description of the state and for the surround of the state and
office or re agent. I a	egistered agent, or both, in the S m familiar with, and accept the o	state of Florida Such change was bligations of, Section 607.0505,	s authorized Florida Stat	d by utes.	the corp	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
SIGNATURE						
	Signature, typed or ponted name of registers		OTE Registered	l Agen	4 signature	e required when reinstating) DATE
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 10			☐ Change ☐ Addition
NAME	PLEMMONS, RICHARD V		1.2 NA	ME		·
STREET ADDRESS	1357 S HANKIN RD		1.3 ST	REET A	address	
CITY - ST - ZIP				1.4 CITY - ST - ZIP		,
TITLE	_		2.1 T()			Change Addition
NAME	PLEMMONS, PATRICIA			2.2 NAME		!
STREET ADDRESS	1357 S HANKIN RD		2.3 ST	REET A	ADDRESS	·
CITY-ST-ZIP				2. 4 CITY - ST - ZIP		
TITLE	-			3.1 TITLE		Change Addition
NAME	SCHILLING, DON		3.2 NA	3.2 NAME		
STREET ADDRESS	3801 SHADY OAK DRIVE I	E	3.3 \$1	REET A	NDDRESS]
CITY-ST-ZIP			3.4. CI		- ZIP	
TITLE			1	4.1 TITLE		Change Addition
NAME	SCHILLING, RENEE	-	4. 2 NA		- 1	
STREET ADDRESS	3801 SHADY OAK DRIVE	t			DDRESS	
CITY-ST-ZIP	LAKELAND FL 33810	Dones	4.4 CIT		·ZIP	
TITLE		DETEIF	5.1 7(7			Change Addition
			5.2 NA			
STREET ADDRESS					DORESS	
CITY+S1-ZIP TITLE		DELETE	5.4 CIT		ZIP	
· · · · · · · · · · · · · · · · · · ·			6.1 111			Change Addition
NAME STREET ADDRESS			6.2 NA		DEDE:	
STREET ADDRESS					DORESS	
CITY-ST-ZIP			6.4 CIT	Y-ST-	·ZIP	

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 expension or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in