2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DOCUMENT # P97000079210

1. Entity Name

DIAMOND "C" TRANSPORT, INC.



FILED Apr 12,.2004 08:00 AM Secretary of State

Principal Place of Business 900 THOMAS AVENUE LEESBURG, FL 34748 Mailing Address

P.O. BOX 490163

LEESBERG, FL 34749-0163



04062004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-3469578

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WHITING, CINDY O 4470 SW 7TH AVE RD OCALA, FL 34474

SIGNATURE:

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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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (INOTE, Registered				required when reinstating)	DATE
FILE NOWIII FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.			sing 🔲	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS		<u> </u>	
TITLE NAME STREET ADDRESS CRY-ST-ZIP	P WHITING, CINDY O 4470 SW 7TH AVE RD OCALA, FL 34474				700000109259 04/12/04-80036-009 158.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP			ı		04/12/04-80036-009 158.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CRY-ST-ZIP				IN .	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. Thereby 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 of 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 attachment with an address, with all other like empowered.					