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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P9700083964 (1)

SHILO TRUCKING, INC.

FILED Mar 05 1998 8:00am Secretary of State

Principal Place of Business Mailing Address						-[IRE ITHER IRIUS BUILD OFF	11061
1259 TAHOE	COURT	1259 TAHOE COURT						
ORANGE PAR			ORANGE PARK FL 32065			DO NOT WOITE IN THIS SPACE		
ľ						DO NOT WRITE IN THIS 3. Date Incorporated or Qualified	SPACE	 1
						09/29/1997		1
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	Applied	d For
21	26					59-3470942	- 1 ` · · · · · · · · · · · · · · · · · ·	plicable
Suite, Apt. #, etc. Suite, Apt. #, etc.							\$8.75 Additi	· · · · · · ·
22	27					5. Certificate of Status Desired	Fee Require	ad
	City & State City & State					6. Election Campaign Financing	\$5.00 May	
23		28				Trust Fund Contribution	Added to Fe	
Zip	Country	Zιρ	Cou	ntry		8. This corporation owes or has paid the c		
24 25 29 30 30 9. Name and Address of Current Registered Agent						Personal Property Tax due June 30. 10. Name and Address of New Registered	∐ Yes ∐ No	
ш		om ringiotored rigoni		81	Name	10. Hallo alla Malabas al Hall Hall States	Agont	
HOLLEN, RONALD D 1259 TAHOE COURT				82 Street Address (P.O. Box Number is Not Acceptable)				
ORANGE PARK FL 32065								
ON	ANGE FANK FE 32003			83				
			ļ		-5:			
	•	•		84	City	FI	85 Zip Code	,
11. Pursuant	to the provisions of Sections 607 0	502 and 607.1508, Florida Statut	es, the at	DOVE-	named corpo	pration submits this statement for the purpose	of changing its reg	istered
agent. I a	m familiar with, and accept the obli	igations of, Section 607.0505, Flo	orida Stat	utes.	no corporano	on's board of directors. I hereby accept the ap	pominioni do regio	, torou
SIGNATURE	Signature, typed or printed name of registered a	gent and title if applicable (NOT	E Registered	і Адопі	signature requirer	d when reinstating) DATE		
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	· ·		1.1 TiT	1.1 TITLE			Change	Addition 2
NAME	HOLLEN, RONALD D		1.2 NA	ME				5
STREET ADDRESS	(·=·- ·· ·· · · · · · · · · · · · · · ·		1.3 ST	1.3 STREET ADDRESS				
CITY-ST-ZIP				TY-ST-	ZIP		——————————————————————————————————————	<u> </u>
TITLE	STD DELETE 21 TO					∐ Change ∐	Addition C	
NAME	HOLLEN, DEBORAH J			2.2 NAME				
STREET ADDRESS	1259 TAHOE COURT		2.3 STREET ADDRESS		i			
CITY-ST-ZIP	OHANGE PARK PL 32069			2.4 CITY-ST-ZIP 3.1 TITLE			☐ Change ☐	Addition
TITLE NAME			3.1 III		1		Li cuange Li	AMINUIT
STREET ADDRESS					DORESS			
CITY-ST-ZIP				HEET AL TY-ST-				
TITLE			4.1 TIT		žir		Change	Addition
NAME			4. 2 NA					
STREET ADDRESS					DORESS			
CITY-ST-ZIP			4.4 CIT		I			
TITLE		DELETE	5.1 TITLE		<u></u>		Change	Addition
NAME			5.2 NA					
STREET ADDRESS			- 1		DORESS			
CITY-ST-ZIP			5.4 CIT					
TITLE			6.1 TIT				Change	Addition
NAME			6.2 NAI		,			
STREET ADDRESS					ODRESS			
CITY-ST-ZIP			6.4 CIT		- 1			
	artifus that the information as unaliged	with this filing doos not smallfulde				action 110 07/2Vi) Florida Statutos I further o	artifuthat the infor	motion

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 suppliemental 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.

GIGNIATUDE.

ma Call O HA

2-17-98