PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000083964 1. Corporation Name

SHILO TRUCKING, INC.

FILED Mar 03, 1999 8:00 am Secretary of State

03-03-1999 90118 015 ***150.00



Principal Place of Business Mailing Address						- T (BB)(BB) (In 1814) 1881) agin agin bbin agin ialag lika agin agin akin alak iagi
1259 TAHOE CO	OURT	1259 TAHOE COURT	9 TAHOE COURT			
ORANGE PARK FL 32065 ORANGE PARK FL 32065						DO NOT WRITE IN THIS SPACE
						3. Date incorporated or Qualified
						09/29/1997
2 Oringinal Di	and of Pusiness	2a. Mailing Address				4. FEI Number Applied For
						59-3470942 Not Applicable
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.						\$8.75 Additional:
22 27						5. Certificate of Status Desired Fee Required
City & State	City & State	y & State			6. Election Campaign Financing S5.00 May Be	
23		28				Trust Fund Contribution Added to Fees
Žip	Country	Zip	Zip Country			8. This corporation owes the current year Intangible
24	25	29 30				Personal Property Tax. Yes No
	9. Name and Address of Currer	t Registered Agent				10. Name and Address of New Registered Agent
	EN DONALD D		81	l Na	ime	
HOLLEN, RONALD D			82	2 Sti	reet Addres	ess (P.O. Box Number is Not Acceptable)
1259 TAHOE COURT						·
UKAI	NGE PARK FL 32065		83	3		
			84	I Cit	tv	85 Zip Code
					•	FL FL FL FL FL FL FL FL
office or re	edictored agent or both in the State	of Florida, Such change was autho	orized by	/ the c	med corpor	oration submits this statement for the purpose of changing its registered n's board of directors. I hereby accept the appointment as registered
agent. I a	m familiar with, and accept the obliga	tions of, Section 607.0505, Florida	Statute	s.		, , , , , , , , , , , , , , , , , , , ,
SIGNATURE						
	Signature, typed or printed name of registered age			ent signa	ature required	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.		ND DIRECTORS ☐ DELETE	13. 1.1 TITLE			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD PONALD D	□ beere	1.2 NAME			
NAME	HOLLEN, RONALD D 1259 TAHOE COURT	1	1.3 STREET A		2500	
STREET ADDRESS					1000	
CITY-ST-ZIP	ORANGE PARK FL 32065 STD	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE			☐ Change ☐ Addition
TITLE			2.1 MLE 2.2 NAME			
NAME	HOLLEN, DEBORAH J 1259 TAHOE COURT		2.3 STREET		oree	
STREET ADDRESS	ORANGE PARK FL 32065		2.3 STREE			- No No.
CITY-ST-ZIP TITLE	ORANGE FARIN FL 32003	☐ DELETE	3.1 TITLE	-SI-AP		☐ Change ☐ Addition
NAME			3.2 NAME			·
STREET ADDRESS			3.3 STREE		RESS	
			3.4 CITY		1	
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TITLE	J. 20		☐ Change ☐ Addition
NAME		_	4, 2 NAME			
STREET ADDRESS			4.3 STREE		RESS	
CITY-ST-ZIP			4.4 CITY-			
TITLE		☐ DELETE	5.1 TITLE			☐ Change ☐ Addition
NAME			5.2 NAME			
STREET ADDRESS		j	5.3 STREE	ET ADDI	RESS	
CITY-ST-ZIP			5.4 CITY-	ST-ZIP		
TITLE	☐ DELETE 6.1		6.1 TITLE	TITLE		☐ Change ☐ Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREE	ET ADD!	RESS	
STACE FOUNDS			C 4 C/TV	or 310	- 1	

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 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, with all other like empowered.

SIGNATURE: