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

P97000084212 (4) DOCUMENT #

R.G.C. TRUCKING, INC.

FILED Apr 16 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						((2011201 110 10111 10011 0014 00111 0014 0110 1201 11011 11011 11011 11011 11011			
9 ACCESS ROAD - BHR 9 ACCESS ROAD - BHR									
OKEECHOBEE FL 34974-9359 OKEECHOBEE FL 34974-9359 OKEECHOBEE FL									
G		***************************************				DO NOT WRITE IN THIS SPACE			
						Date Incorporated or Qualifie 09/26/1997	d		·
2. Principal P	ace of Business	2a. Mailing Addre	2a. Mailing Address			4. FEI Number		Ai	pplied For
21		26	26			65-6780114			ot Applicable
Sulte, Apt.	#, etc.		Suite, Apt. #, etc.					\$8.75	Additional
22		27	27			5. Certificate of Status Desired			equired
City & State	9	City & State	······································			6. Election Campaign Financing		\$5.00	May Be
23		28	28			Trust Fund Contribution			to Fees
Zip	Country	Zip	Co	untry		8. This corporation owes or has	paid the cur	rent year Ini	tangible
24	25	29	30			Personal Property Tax due Ju]Yes 🍹	Š I No
	9. Name and Address of Cu			Τ		10. Name and Address of New	Registered a	Agent	
CASSIN, RUSS									ì
9 ACCESS ROAD - BHR						(0.0 Bank)	1-C(-)		
	EECHOBEE FL 34974-9359		82 Street Ac			dress (P.O. Box Number is Not Accep	(abie)		
J.,	220110022 12 010/1 0000			83					
				84	City		FL	85 Zip	Code
44 Durayant	to the provinces of Sections COT	OFO2 and GOZ 1EDQ Florid	a Stalutan, the s	L_1	named co	rporation submits this statement for th		changing i	te registered
office or r	egistered agent, or both, in the	State of Florida. Such chang	a statutes, trio c pe was authorize	ed by	the corpora	ation's board of directors. I hereby ac	cept the app	ointment as	registered
agent. I a	m familiar with, and accept the o	obligations of, Section 607.0	505, Florida Sta	tutes					
SIGNATURE							DATE		
	Stgnature, typed or printed name of registers	S AND DIRECTORS	(NOTE: Hegisters	ed Apor	nt signature req	ulred when reinstating) ADDITIONS/CHANGES TO OF		DIRECTOR	28 IN 12
12,	OFFICERS	DEL		ITLE		ADDITIONS/CHANGES TO OF	FICENS AND	Change	Addition
TITLE	CASSIN, RUSS							- onengo	
NAME	9 ACCESS ROAD - BHR			IAME					1
STREET ADDRESS	OKEECHOBEE FL 34974-	0250		1.3 STREET ADDRESS					
CITY-ST-ZIP	ONECOHODEC 1 C 34874	DE		HTY-ST	I - ZIP			Change	Addition
TITLE		Land Des						€ CHANGE	☐ Addition
NAME			2.2 N	IAME					
STREET ADDRESS			2.3 9	STREET	ADDRESS				
CITY-ST-ZIP				CITY-S	T-ZIP			1 - 2	
TITLE		∐ DEI	.ETE 3.1 T	ITLE				☐ Change	☐ Addition
NAME			3.2 N	IAME					
STREET ADDRESS			3.3 5	STREET	ADDRESS				,
CITY-ST-ZIP				CITY - S	T-ZIP				
TITLE		☐ DEI	.ÉTĒ 4.1 3	TITLE				Change	Addition
NAME			4. 2	NAME					
STREET ADDRESS			4.3 9	STREET	ADDRESS				
CITY-ST-ZIP			4.4.0	CITY-ST	I-21P				
TITLE		☐ DEI						Change	Addition
NAME			5.2 1	IAME					
STREET ADDRESS			5.3 9	STREET	ADDRESS				
CITY-ST-ZIP				CITY-ST					ļ
TITLE		☐ DEI		IITLE				Change	☐ Addition
NAME		_		JAME					
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP				CITY-ST		n Section 110 07/3Vi) Florida Statuto	a I fuelbor se	elify that the	information

I necept 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 informatic 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.

911-763-1-289 11-111-60