## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # P97000097423

1. Entity Name

KEN'S TRUCKING COMPANY

Principal Place of Business

Mailing Address

3972 SUZANNE DRIVE MIDDLEBURG FL 32068 1560 HERNY MOSLEY RD BALDWIN FL 32234-3406

## FILED May 01, 2000 8:00 am Secretary of State

05-01-2000 90047 045 \*\*\*150.00



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Suite, Apt.		Suite, Apt. #, etc.			DO NOT WRI	TE IN THIS SF	ACE	
y Chy & State	oura Florida	Middlebum	Florida	<b>4.</b> F	El Number <b>59-348019</b>	4		plied For Applicable
32068	Country	32068	Country USA	5. C	Certificate of Status Desired	□ <b>\$</b>	<b>8.75</b> Addi	itional J
<u> </u>	6. Name and Address of Current R	egistered Agent		7. N	ame and Address of New F	Registered Ag	ent	
	Name	Name						
EVANS, KENNETH W- 3972 SUZANNE DRIVE MIDDLEBURG FL 32068			Street Address (P.O. Box Number is Not Acceptable)					
			1121	Ha	tcher Ro	l		
•			City	11 1	Maner 1	FL	<b>∂</b> Gode	10
			Mid	de	ourg		777	160
8. The above	named entity submits this statement for	the purpose of changing its re	gistered office or regi	istered age	int, or both, in the State of Flo	orida.		
								}
SIGNATURE .	Signature, typed or printed name of registered agent an	d Mar V and Karlan	anistored Agent elegative rec	nuired when rein	poteting	DATE		
	Signature, typed or printed name of registered agent an	d the ii applicable. (NOTE: He	egistered Agent signature rec	danea when ten		DAIC		
9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00						nancing .	\$5.00	May Be
Tax filing requirement and elects to do so.  (See criteria on back)  After MAY 1, 2000 I  Make Check Payable to					Trust Fund Contributio	~ ~		to Fees
(See criter		Make Check Payable						
	OFFICERS AND D		12	ADI	DITIONS/CHANGES TO OFF	FICERS AND E		
TITLE	P	Delete	TITLE			(	Change	Addition
NAME	EVANS, KENNETH W		NAME	1121	Hatcher	Rd		
STREET ADDRESS CITY-ST-ZIP	3972 SUZANNE DRIVE MIDDLEBURG FL 32068		STREET ADDRESS CITY-ST-ZIP		Hatcher Lleburg 1	=) =	1206	68
	VPT			MIT	aleborg I		Change	☐ Addition
TITLE NAME	EVANS, JAMES A	Delete	TITLE NAME			1	Griange	Addition
STREET ADDRESS	1560 HENRY MOSLEY ROAD		STREET ADDRESS					}
CITY-ST-ZIP	BALDWIN FL 32234		CITY-ST-ZIP					
TITLE	S	• Delete	TITLE				Change	☐ Addition
NAME	EVANS, FAYE	- Coloid	NAME			•		_
STREET ADDRESS	1560 HENRY MOSLEY ROAD		STREET ADDRESS					,
CITY-ST-ZIP	BALDWIN FL 32234	A	CITY+ST-ZIP				<u> </u>	<u> </u>
TITLE		☐ Delete	TITLE			[	Change	Addition
NAME			NAME					
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CITY-ST-ZIP			CITY-ST-ZIP					
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		□ n-1-4-				<u>-</u>	] Change	Addition
TITLE NAME		☐ Delete	TITLE NAME			l	Unange	
STREET ADDRESS		•	STREET ADDRESS		•	;	•	
CITY-ST-ZIP			CITY-ST-ZIP			•	•	1
13.   hereby d	ertify that the information supplied with t	his filing does not qualify for th	ne exemption stated in	n Section 1	19.07(3)(i), Florida Statutes.	I further certif	y that the in	formation

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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 in changed, or on an attachment with gh address, with all other like empowered.