

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000018796

1. Entity Name

BLANKENSHIP TRUCKING, INC.

FILED

May 15, 2000 8:00 am
Secretary of State

05-15-2000 90229 021 ***150.00

Principal Place of Business

Mailing Address

ROUTE 6 BOX 1458
PALATKA FL 32177

ROUTE 6 BOX 1458
PALATKA FL 32177-9806



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

120 MOCCASIN CREEK DRIVE
Suite, Apt. #, etc.

120 MOCCASIN CREEK DRIVE
Suite, Apt. #, etc.

City & State

Palatka, Florida

City & State

Palatka, Florida

4. FEI Number

59-3502495

Applied For

Not Applicable

Zip

32177

Country

USA

Zip

32177

Country

USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BLANKENSHIP, DENVER
ROUTE 6 BOX 1458
PALATKA FL 32177

Name

Blankenship, Denver

Street Address (P.O. Box Number is Not Acceptable)

120 MOCCASIN CREEK DRIVE

City

Palatka

FL

Zip Code

32177

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.

SIGNATURE

Denver B. Blankenship

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4/27/00

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	BLANKENSHIP, DENVER L	
STREET ADDRESS	ROUTE 6 BOX 1458	
CITY-ST-ZIP	PALATKA FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	P/D	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Blankenship, Denver	
STREET ADDRESS	120 MOCCASIN CREEK DRIVE	
CITY-ST-ZIP	Palatka, FL. 32177	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Denver B. Blankenship*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/00

Date

Daytime Phone #