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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000073309

1. Corporation Name

KINSEY TRANSPORT, INC.

FILED Apr 08, 1999 8:00 am Secretary of State

04-08-1999 90019 013 ***150.00



Principal Place of Business Mailing Address						1 (201130) 1/2 (2/2) 1014 2014 4014 4014 1014 1014 1114 2014	•••		
6261 HOLSTEIN DR. 6261 HOLSTEIN DR. FT. MYERS FL 33905 FT. MYERS FL 33905							DO NOT WRITE IN THIS SPACE		
l							3. Date Incorporated or Qualifed	\neg	
							08/20/1998		
Principal Place of Business 2a. Mailing Address				_			4. FEI Number Applied For		
21	26				11-11-31		65-0862-0/7 Not Applica		
Suite, Apt. #, etc. Suite, Apt. #, etc.							\$8.75 Additional		
22 27							Fee Required		
City & State			City & State				6. Election Campaign Financing Trust Fund Contribution S5.00 May Be Added to Fees		
Zip	Country Zip Col			untry		8. This corporation owes the current year Intangible			
24	25	29	30				Personal Property Tax. Yes No		
Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent		
	-14 - Fammaa				81	Name			
KINSEY, FARRAH					82 Street Address (P.O. E		dress (P.O. Box Number is Not Acceptable)		
6261 HOLSTEIN DR.					L				
j F1. N	MYERS FL 33905				83				
					84	City	FL 85 Zip Code		
44. D. S. Hall and J. C. S. Line CO. 7.0502 and CO. 7.4509. Elargida Statutes, the above named corporation submits this statement for the purpose of changing its registration.								ed	
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
12.	OFFICERS AN			13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	2 2	
TITLE	D		☐ DELETE	1.1 T	TLE		☐ Change ☐ Ad	dition	
NAME	KINSEY, FARRAH			1.2 N	IAME			3	
STREET ADDRESS	6261 HOLSTEIN DR.			1.3 5	TREE	TADDRESS		ן נ	
CITY-ST-ZIP	FT. MYERS FL 33905			1.4 0	1.4 CITY-ST-ZIP			ؤ لــــــ	
TITLE	D DELETE			2.1 T	ΠĘ		☐ Change ☐ Ad	idition	
NAME	KINSEY, RICHARD		2.2 №	IAME			ļ		
STREET ADDRESS	6261 HOLSTEIN DR.			2.3 5	TREE	TADDRESS			
CITY-ST-ZIP	FT. MYERS FL 33905			.2.40	2.4 CITY-ST-ZIP				
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NAME					IAME				
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CITY-ST-ZIP	······································		[7]		TTY-S	I-ZIP		tdition	
TITLE			(DELETE				☐ Change ☐ Ad	dition	
NAME				1	IAME				
STREET ADDRESS	·			6.3 5	IKEE	T ADDRESS		}	

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. CITY-ST-ZIP

SIGNATURE:

693-6064