

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 27, 2002 8:00 am
Secretary of State
 05-27-2002 90355 038 ***150.00

04/18/03 AV

DOCUMENT # P98000084975

1. Entity Name
JIM HANSEN TRUCKING, INC.

Principal Place of Business
3208 RECKER HIGHWAY
WINTER HAVEN FL 33880

Mailing Address
POST OFFICE BOX 1810
AUBURNDALE FL 33823-1810



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3536190**

Applied For
 Not Applicable

Zip

Country

Zip

Country

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

HANSEN, MARLENE J
3208 RECKER HWY
WINTER HAVEN FL 33880

Name

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

City

FL

Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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, 2002 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

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
PD	HANSEN, JAMES D		
3208 RECKER HIGHWAY	3208 RECKER HIGHWAY		
WINTER HAVEN FL 33880	WINTER HAVEN FL 33880		
VD	HANSEN, MARLENE J		
3208 RECKER HIGHWAY	3208 RECKER HIGHWAY		
WINTER HAVEN FL 33880	WINTER HAVEN FL 33880		
ST	STALFORD, WENDY M		
3208 RECKER HIGHWAY	3208 RECKER HIGHWAY		
WINTER HAVEN FL 33880	WINTER HAVEN FL 33880		

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: Marlene J. Hansen **MARLENE J. HANSEN** 4/24/2002 863-967-1129
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)