

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Apr 25, 2006 08:00 AM
Secretary of State**

DOCUMENT # P98000091364

1. Entity Name
SOUTHSTAR TRANSPORTATION SERVICES, INC.



Principal Place of Business
3261 S.E. COURT DRIVE
STUART, FL 34996

Mailing Address
3261 S.E. COURT DRIVE
STUART, FL 34996



04182006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0872345

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

BROWN, BRYAN
3261 S.E. COURT DRIVE
STUART, FL 34996

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IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

U000000532230
05/06/06-80075-025 150.00

10. OFFICERS AND DIRECTORS

TITLE PTD
NAME BROWN, BRYAN
STREET ADDRESS 3261 S.E. COURT DRIVE
CITY-ST-ZIP STUART, FL 34996

TITLE VPSD
NAME BROWN, MYRA
STREET ADDRESS 3261 S.E. COURT DRIVE
CITY-ST-ZIP STUART, FL 34996

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
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STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Myra S. Brown MYRA S. BROWN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR VICE PRESIDENT

4-24-06 417-499-7206
Date Daytime Phone #