

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

APPROVED AND FILED

99 MAR 29 PM 2: 19

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

- 3. Date Incorporated or Qualified: **12/17/1998**
- 4. FEI Number: **59-3353549** Applied For Not Applicable
- 5. Certificate of Status Desired: **\$8.75** Additional Fee Required
- 6. Election Campaign Financing Trust Fund Contribution: **\$5.00** May Be Added to Fees
- 8. This corporation owes the current year Intangible Personal Property Tax: Yes No

DOCUMENT # P98000104551

1. Corporation Name
SUNSHINE TRUCKING OF TALLAHASSEE, INC.

Principal Place of Business: **615 SAINT PATRICK DR. TALLAHASSEE FL 32310**
 Mailing Address: **615 SAINT PATRICK DR. TALLAHASSEE FL 32310**

2. Principal Place of Business: **21**
 Suite, Apt #, etc.: **22**
 City & State: **23**
 Zip: **24** Country: **25**
 2a. Mailing Address: **26**
 Suite, Apt #, etc.: **27**
 City & State: **28**
 Zip: **29** Country: **30**

9. Name and Address of Current Registered Agent

COOK, LORA MAY
615 SAINT PATRICK DR.
TALLAHASSEE FL 32310

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL **85** Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered 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 is not to be typed.) (DATE)

12. OFFICERS AND DIRECTORS

TITLE	DP	<input checked="" type="checkbox"/> DELETE
NAME	HAMILTON, WESLEY H	
STREET ADDRESS	1721 WADE RD.	
CITY-ST-ZIP	TALLAHASSEE FL 32310	
TITLE	DV	<input type="checkbox"/> DELETE
NAME	RANDALL COOK, JACK	
STREET ADDRESS	615 SAINT PATRICK DR.	
CITY-ST-ZIP	TALLAHASSEE FL 32310	
TITLE	DS	<input type="checkbox"/> DELETE
NAME	COOK, LORA MAY	
STREET ADDRESS	615 SAINT PATRICK DR.	
CITY-ST-ZIP	TALLAHASSEE FL 32310	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	<i>DP</i>
23 STREET ADDRESS	<i>Randall Cook, Jack</i>
24 CITY-ST-ZIP	<i>615 Saint Patrick Dr.</i>
31 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	<i>DP/DV/DS</i>
33 STREET ADDRESS	<i>COOK, LORA MAY</i>
34 CITY-ST-ZIP	<i>615 Saint Patrick Dr.</i>
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

300002822099
 -03/29/99-01114-021
 ****158.75 ****158.75

JB
3-29-99

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(g), 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.

SIGNATURE: *Lora M. Cook* Lora M. COOK

3/29/99 \$50/574-1011

000590

CR2E034 (11/98)