

# 2000 UNIFORM BUSINESS REPORT (UBR)

4/4.

**FILED**  
**May 15, 2000 8:00 am**  
**Secretary of State**

04-04-2000 90036 024 \*\*\*150.00

**DOCUMENT # P99000057737**

1. Entity Name

**TURN THE PAGE TRUCKING, INC.**

Principal Place of Business

118 WEST ORANGE STREET  
 ALTAMONTE SPRINGS FL 32714

Mailing Address

118 WEST ORANGE STREET  
 ALTAMONTE SPRINGS FL 32714-2537

2. Principal Place of Business

2459 Cashew Lane

Suite, Apt. #, etc.

3. Mailing Address

2459 Cashew Lane

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State  
 Ft. Pierce FL

Zip  
 34946

Country  
 USA

City & State  
 Ft. Pierce FL

Zip  
 34946

Country  
 USA

4. FEI Number

65-0927973

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
 Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.  
 343 ALMERIA AVENUE  
 CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name  
 Anthony S. Burling

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

2459 Cashew Lane

City  
 Fort Pierce

FL

Zip Code  
 34946

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

*Anthony S. Burling*

4/18/00

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

(NOTE: Registered Agent signature required when reinstating)

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

TITLE  
 PD  
 NAME  
 BURLING, ANTHONY S  
 STREET ADDRESS  
 118 WEST ORANGE STREET  
 CITY-ST-ZIP  
 ALTAMONTE SPRINGS FL 32714 ☐ Delete

TITLE  
 ST  
 NAME  
 CHUHALOFF, RISTIE  
 STREET ADDRESS  
 118 WEST ORANGE STREET  
 CITY-ST-ZIP  
 ALTAMONTE SPRINGS FL 32714 ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 2459 Cashew Lane  
 Ft. Pierce FL 34946 ☒ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 160 RICHARD STREET  
 SEBASTIAN FL 32958 ☒ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Change ☐ Addition

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

*Ristie Chuhloff*

SEC/TREAS  
 RISTIE CHUHALOFF

3-30-00 561-584-9872

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)