2004 FOR PROFIT CORPORATION

Jan 15, 2004 08:00 AM ANNUAL REPORT **Secretary of State** DOCUMENT # P99000064649 1. Entity Name CHANESAW TRANSPORTATION, INC. Principal Place of Business Mailing Address 11150 ALTA RD. 11150 ALTA RD. JACKSONVILLE, FL 32226 JACKSONVILLE, FL 32226 01132004 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FFI Number 59-3587760 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent BRIDGES, DOROTHY J DO NOT WRITE 11150 ALTA RD. JACKSONVILLE, FL 32226 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, SIGNATURE gistered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2004 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE BRIDGES, DOROTHY J NAME 11150 ALTA RD. STREET ADDRESS U00000004436 01/15/04 80012-019 150.00 CITY - ST - ZIP JACKSONVILLE, FL 32226 TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP

12. Thereby 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 10 or Block 11 if changed, or on an attachment with an address, with all of

TITLE NAME STREET ADDRESS CITY+ST-ZIP

FILED