2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000080312

Entity Name: TIM FORD TRUCKING, INC.

FILED May 01, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5411 ST HELENA ROAD 933 LAKE OTIS DRIVE LAKE WALES, FL 33853 WINTER HAVEN, FL 33880 **Current Mailing Address: New Mailing Address:** PO BOX 888 BRANDON, FL 335090888 FEI Number: 59-3598162 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TOMPKINS, H CHRISTOPHER II 1706 S KINGS AVE BRANDON, FL 33511 US 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: Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PSTD () Delete Title: (X) Change () Addition HOWLE, JAMES A. W. Name: FORD, TIM Name: 5411 ST HELENA ROAD 933 LAKE OTIS DRIVE Address: Address: City-St-Zip: LAKE WALES, FL 33853 City-St-Zip: WINTER HAVEN, FL 33880 Title: VD Title: () Delete () Change () Addition Name: TOMPKINS, HOWARD CII Name: 1706 S KINGS AVE Address: Address: BRANDON, FL 335116216 City-St-Zip: City-St-Zip: Title: Title: () Delete STD () Change (X) Addition Name: FORD, DEBRA DIANA Name: 933 LAKE OTIS DRIVE Address: Address: City-St-Zip: City-St-Zip: WINTER HAVEN, FL 33880

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: H CHRISTOPHER TOMPKINS II D 05/01/2002