

AMENDED REPORT

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 525760

1. Entity Name
Crosno Trucking, Inc.

Principal Place of Business
4835 John Carroll Rd. S.
Lakeland, FL 33801

Mailing Address
4835 John Carroll Rd. S.
Lakeland, FL 33801

2. Principal Place of Business
216 John Carroll Rd. E.
Suite, Apt. #, etc.

3. Mailing Address
216 John Carroll Rd. E.
Suite, Apt. #, etc.

City & State
Lakeland, FL

City & State
Lakeland, FL

Zip
33801

Country

Zip
33801

Country

4. FEI Number
59-3044894

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
Crosno, Madolme Janice Gail
4835 John Carroll Rd. S.
Lakeland, FL 33801

7. Name and Address of New Registered Agent
Name
Johnny Crosno
Street Address (P.O. Box Number is Not Acceptable)
216 John Carroll Rd. E.
City
Lakeland FL Zip Code
33801

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

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

(NOTE: Registered Agent signature required when reappointing)

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, 2001 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	D	☐ Delete
NAME	Crosno, Johnny	
STREET ADDRESS	4835 John Carroll Rd. S.	
CITY-ST-ZIP	Lakeland, FL 33801	
TITLE	D	☒ Delete
NAME	Crosno, Madolme J.G.	
STREET ADDRESS	4835 John Carroll Rd. S.	
CITY-ST-ZIP	Lakeland, FL 33801	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D P	☒ Change ☐ Addition
NAME	Crosno, Johnny	
STREET ADDRESS	216 John Carroll Rd. E.	
CITY-ST-ZIP	Lakeland, FL 33801	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I hereby 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

22000

Excluded from cover

CR20034 (11/00)