

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S52706

1. Entity Name

MARKHAM TRANSPORTATION, INC.

FILED
Apr 01, 2000 8:00 am
Secretary of State

04-01-2000 90001 019 ***150.00

Principal Place of Business

Mailing Address

1800 OLD KINGS RD
JACKSONVILLE FL 32254
US

3261 OLD KINGS RD
JACKSONVILLE FL 32254-1437

2. Principal Place of Business

3. Mailing Address

7800 Old Kings Rd.
Suite, Apt. #, etc.

7800 Old Kings Rd.
Suite, Apt. #, etc.

City & State
Jacksonville, FL

City & State
Jacksonville, FL

Zip
32219

Country
USA

Zip
32219

Country
USA

4. FEI Number 59-3065704

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

---6. Name and Address of Current Registered Agent

---7. Name and Address of New Registered Agent

GIFFORD, TERESA
3261 OLD KINGS RD
JACKSONVILLE FL

Name

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

City

FL

Zip Code

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 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
MARKHAM, THOMAS LARRY JR
7001 CISCO GARDEN ROAD
JACKSONVILLE FL ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
GIFFORD, TERESA MARKHAM
4010 WINDY GALE DRIVE
JACKSONVILLE FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
8475 Garden St.
Jacksonville, FL 32219 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T.
MARKHAM, THOMAS JR
7001 CISCO GARDEN ROAD
JACKSONVILLE FL ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
GIFFORD, TERESA MARKHAM
4010 WINDY GALE DRIVE
JACKSONVILLE FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
8475 Garden St.
Jacksonville, FL 32219 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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)(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: Teresa Gifford
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/00 904-713-8900
Date Daytime Phone #

CR2E034 (9/99)