**FILE NOW: FILING FEE AFTER MAY 1 IS $225.00**

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
'95 APR 11 PM 1:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S64088** **(5)**

1. Corporation Name
**GTS TRUCKING, INC.**

| Principal Place of Business | Mailing Address |
|---|---|
| ~~9210 PARKER AVENUE~~<br>~~JACKSONVILLE FL 32218~~<br>4062 North Liberty Street<br>Jacksonville, FL. 32206 | ~~9210 PARKER AVENUE~~<br>~~JACKSONVILLE FL 32218~~<br>4062 North Liberty Street<br>Jacksonville, FL. 32206 |

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/03/1991
3a. Date of Last Report: 04/27/1994

| 2. Principal Place of Business | 2a. Mailing Address |
|---|---|
| 21 4062 North Liberty Street | 26 4062 North Liberty Street |
| Suite, Apt. #, etc.<br>22 N/A. | Suite, Apt. #, etc.<br>27 N/A |
| City & State<br>23 Jacksonville, FL. | City & State<br>28 Jacksonville, FL. |
| Zip / Country<br>24 32206 / 25 Duval. | Zip / Country<br>29 32206 / 30 Duval. |

4. FEI Number: 59-3076563 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

FUQUA, MARSHA L.
1333 DUNN AVE APT 902
JACKSONVILLE FL 32218

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Marsha L. Fuqua — 4-5-95
Signature (required for printed name of registered agent and type of capacity) (NOTE: Registered Agent signature required when executing) DATE

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | |
|---|---|---|---|---|
| TITLE | PD / Trcs. | 11 TITLE | Pres. + Trcs. | ☒ Change ☐ Addition |
| NAME | WESTBERRY, JOHN C. SR. | 12 NAME | John C. Westberry Sr. | |
| STREET ADDRESS | RT. 4, BOX 278 | 13 STREET ADDRESS | RT. 4 Box 278 | |
| CITY-ST-ZIP | CALLAHAN FL 32011 | 14 CITY-ST-ZIP | Callahan, FL. 32011 | |
| TITLE | VP | 21 TITLE | | ☐ Change ☐ Addition |
| NAME | WESTBERRY, CAROLYN S. | 22 NAME | | |
| STREET ADDRESS | RT. 4, BOX 278 | 23 STREET ADDRESS | | |
| CITY-ST-ZIP | CALLAHAN FL 32011 | 24 CITY-ST-ZIP | | |
| TITLE | ~~ST.~~ | 31 TITLE | Secretary | ☒ Change ☐ Addition |
| NAME | ~~MACLEAN, GORDON~~ | 32 NAME | Robert N. Westberry | |
| STREET ADDRESS | ~~4419 KEY LARGO DRIVE~~ | 33 STREET ADDRESS | RT. 4 Box 278 | |
| CITY-ST-ZIP | ~~JACKSONVILLE FL~~ | 34 CITY-ST-ZIP | Callahan, FL. 32011 | |
| TITLE | Secretary (ST) | 41 TITLE | | ☐ Change ☐ Addition |
| NAME | Robert N. Westberry | 42 NAME | | |
| STREET ADDRESS | RT. 4 Box 278 | 43 STREET ADDRESS | | |
| CITY-ST-ZIP | Callahan, FL. 32011 | 44 CITY-ST-ZIP | | |
| TITLE | | 51 TITLE | | ☐ Change ☐ Addition |
| NAME | | 52 NAME | | |
| STREET ADDRESS | | 53 STREET ADDRESS | | |
| CITY-ST-ZIP | | 54 CITY-ST-ZIP | | |
| TITLE | | 61 TITLE | | ☐ Change ☐ Addition |
| NAME | | 62 NAME | | |
| STREET ADDRESS | | 63 STREET ADDRESS | | |
| CITY-ST-ZIP | | 64 CITY-ST-ZIP | | |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: John C. Westberry Sr. — 4-5-95 — 904-356-6001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0003148 CP