

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
May 06 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # S64088 (5)

1. Corporation Name  
GTS TRUCKING, INC.



Principal Place of Business

4062 N LIBERTY ST  
JACKSONVILLE FL 32206  
US

Mailing Address

4062 N LIBERTY ST  
JACKSONVILLE FL 32206  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/03/1991

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 435 Clark Rd

Suite, Apt. #, etc.

22 #305

City & State

23 Jacksonville, FL

Zip

24 32218

Country

25 Duval

2a. Mailing Address

26 Same

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

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

John Westberry Sr.

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

435 Clark Rd

83

#305

84 City

Jacksonville

FL

85 Zip Code  
32218

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

John C. Westberry

(NOTE: Registered Agent signature required when reinstating)

DATE

4/28/98

12. OFFICERS AND DIRECTORS

TITLE **President** ☐ DELETE

NAME **WESTBERRY, JOHN C. SR.**

STREET ADDRESS **RT. 4, BOX 278**

CITY-ST-ZIP **CALLAHAN FL**

TITLE **VP** ☒ DELETE

NAME **WESTBERRY, CAROLYN S.**

STREET ADDRESS **RT. 4, BOX 278**

CITY-ST-ZIP **CALLAHAN FL**

TITLE **(Sec.)** ☐ DELETE

NAME **WESTBERRY, ROBERT N.**

STREET ADDRESS **RT 4 BOX 278**

CITY-ST-ZIP **CALLAHAN FL**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **Patricia A. King (DIRECTOR)** ☐ Change ☒ Addition

1.2 NAME **10950 Hamilton Downs Ct.**

1.3 STREET ADDRESS **Jacksonville, FL 32257**

1.4 CITY-ST-ZIP

2.1 TITLE **(DIRECTOR)** ☒ Change ☐ Addition

2.2 NAME **Carolyn S. Westberry**

2.3 STREET ADDRESS **RT 4, Box 278**

2.4 CITY-ST-ZIP **Callahan, FL**

3.1 TITLE **(TREAS.)** ☐ Change ☒ Addition

3.2 NAME **Tim J. Murray**

3.3 STREET ADDRESS **12648 Sandridge Dr**

3.4 CITY-ST-ZIP **Jacksonville, FL 32258**

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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.

CR2E034 (10/97)