2000 UNIFORM BUSINESS REPORT (UBR) OCUMENT # S68149 RUTH WEBB TRUCKING, INC. Mailing Address nincipal Place of Business P.O. BOX 825 J. BOX 825 BRISTOL FL 32321-0825 FL 32321 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number 59-3083000 Zip Zip _Country Country 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent WEBB. WILFORD RAY Street Address (P.O. Box Number is Not Acceptable) HIGHWAY 12 N **BRISTOL FL 32321** City

FILED Apr 18, 2000 8:00 am Secretary of State

04-18-2000 90205 008 ***150.00

Applied For

\$8.75 Additional

Fee Required

Zip Code

Not Applicable

GNATURE _	Signature, typed or printed name of registered agent and t	tle if applicable. (NOTE. I	Registered Agent signature required w	hen reinstating) DATE		
Tax filing requirement and elects to do so. After MAY 1, 2000			FEE IS \$150.00 Fee will be \$550.00 to Department of State	10. Election Campaign Financing Trust Fund Contribution.		May Be
1.	^*OFFICERS:AND/DIRECTORS		12.	ADDITIONS/CHANGES TO OFFICERS A	VD DIRECTOR	
ile Ame Reet address Ty-st-zip	PD WEBB, WILFORD RAY HWY 12 N FOX RUN RD BRISTOL FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition
TLE AME IREET ADDRESS TY-ST-ZIP	VD WEBB, RUTH	Delete 'ASCED	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change	Addition
TLE AME PEET ADDRESS TY-ST-ZIP	T WEBB, WILFORD L ROCK BLUFF RD BRISTOL FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition
TLE AME REET ADDRESS TY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition
TLE AME REET ADDRESS TY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		· Change	☐ Addition
TLE AME TREET ADORESS TY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition

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 TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR WILFORD RWebb Date 4-12-2000 Dayline Phone #