

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB -8 AM 8:46

DOCUMENT # V22220

(0)

1. Corporation Name

STRICKLAND TRUCKING, INC.

Principal Place of Business

800 11TH STREET NORTH
ST. PETERSBURG FL 33705

Mailing Address

P.O. BOX 60297
ST. PETERSBURG FL 33784
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

03/16/1992

3a. Date of Last Report

02/21/1994

4. FEI Number

59-3111685

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

2. Principal Place of Business

21 4451 8th Avenue South

2a. Mailing Address

25 same as above

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 St. Petersburg, FL

27 City & State

28

24 33711

25 Pinellas

29 Zip

30 Country

9. Name and Address of Current Registered Agent

STRICKLAND, JIMMY M.
800 11TH STREET NORTH
ST. PETERSBURG FL 33705

10. Name and Address of New Registered Agent

81 Name

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

4451 8th Avenue South

83

84 City

St. Petersburg

FL

85 Zip Code

33711

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

(Address change only)

Jimmy Strickland, President

2/1/95

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME STRICKLAND, JIMMY M.
STREET ADDRESS 800 11TH STREET NORTH
CITY-ST-ZIP ST. PETERSBURG FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

4451 8th Avenue South

1.4 CITY-ST-ZIP

St. Petersburg, FL 33711

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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)(b), Florida Statutes. I further certify that the information included on this annual report or supplement thereto 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 appointed to execute this report as required by Chapter 007, Florida Statutes; and that my name appears in Block 12 or Block 13, or on an attachment thereto.

SIGNATURE:

Jimmy Strickland, President 2/1/95 (813) 321-8777

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNER OFFICER OR DIRECTOR

Date

Telephone Number