

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR -4 AM 9:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P07687 (7)

1. Corporation Name
AAA COOPER TRANSPORTATION, INC.

Principal Place of Business Mailing Address
**1751 KINSEY ROAD P.O. BOX 6827
DOTHAN AL 36303 DOTHAN AL 36302**

**800001448728
-04/06/95--01015--007
*****200.00 *****200.00**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **10/09/1985** 3a. Date of Last Report **04/29/1994**

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip 28 Country

24 25 29 30

4. FEI Number **63-0364620** 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

10. Name and Address of New Registered Agent

**UNITED STATES CORPORATION COMPANY
110 NORTH MAGNOLIA STREET
TALLAHASSEE FL 32301**

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

Signature, typed or printed name of registered agent and fee application

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PTD**
NAME **DOVE, G. MACK**
STREET ADDRESS **1431 KINSEY ROAD**
CITY - ST - ZIP **DOTHAN AL**

11 TITLE Change Addition
12 NAME
13 STREET ADDRESS **1751 Kinsey Road**
14 CITY - ST - ZIP

TITLE **V**
NAME **COGGINS, CHARLES E.**
STREET ADDRESS **1431 KINSEY ROAD**
CITY - ST - ZIP **DOTHAN AL**

21 TITLE Change Addition
22 NAME
23 STREET ADDRESS **1751 Kinsey Road**
24 CITY - ST - ZIP

TITLE **V**
NAME **BARKLEY, JAMES E.**
STREET ADDRESS **1431 KINSEY ROAD**
CITY - ST - ZIP **DOTHAN AL**

31 TITLE Change Addition
32 NAME
33 STREET ADDRESS **1751 Kinsey Road**
34 CITY - ST - ZIP

TITLE **V**
NAME **PEARCE, FRED J**
STREET ADDRESS **1431 KINSEY ROAD**
CITY - ST - ZIP **DOTHAN AL**

41 TITLE Change Addition
42 NAME
43 STREET ADDRESS **1751 Kinsey Road**
44 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

51 TITLE Change Addition
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

61 TITLE Change Addition
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

4/4/95 MST

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 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 its receiver or trustee empowered to execute this report as required by Chapter 007, Florida Statutes; and that my name appears in Block 12 or 13, as applicable, or on an attachment with an address.

SIGNATURE: *Charles E. Coggins* / Charles E. Coggins 3/27/95 334-793-2284
Signature and typed or printed name of filing officer or director

Vice-President/Administration & Finance