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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P24507 (6)

1. Corporation Name
HANNA TRUCK LINE, INC

Principal Place of Business 3800 COMMERCE AVE. P.O. BOX 192 FAIRFIELD AL 35064	Mailing Address 3800 COMMERCE AVE. P.O. BOX 192 FAIRFIELD AL 35064
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DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 05/25/1989	3a. Date of Last Report 04/18/1994
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 63-0599971	Applied For <input type="checkbox"/> Not Applicable
City & State 23	City & State 28	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
Zip 24	Country 25	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
		7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent JOHNNY ELTZ 4032 WEST 23RD STREET PANAMA CITY FL 32405	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
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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 title if applicable (NOTE: Registered Agent signature required when constituting) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P	HANNA, PETE M	1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	3800 COMMERCE AVE.	12 NAME	
STREET ADDRESS	FAIRFIELD AL	13 STREET ADDRESS	
CITY - ST - ZIP		14 CITY - ST - ZIP	
TITLE V	MONTGOMERY, LOUIS E.	2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	3800 COMMERCE AVE.	22 NAME	
STREET ADDRESS	FAIRFIELD AL	23 STREET ADDRESS	
CITY - ST - ZIP		24 CITY - ST - ZIP	
TITLE V	BLACK, ROGER D	3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	3800 COMMERCE AVE.	32 NAME	
STREET ADDRESS	FAIRFIELD AL	33 STREET ADDRESS	
CITY - ST - ZIP		34 CITY - ST - ZIP	
TITLE CD	HANNA, PETE M. (CEO)	4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	3800 COMMERCE AVE.	42 NAME	
STREET ADDRESS	FAIRFIELD AL	43 STREET ADDRESS	
CITY - ST - ZIP		44 CITY - ST - ZIP	
TITLE T	BRANDON, JAMES W. JR	5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	3800 COMMERCE AVE.	52 NAME	
STREET ADDRESS	FAIRFIELD AL	53 STREET ADDRESS	
CITY - ST - ZIP		54 CITY - ST - ZIP	
TITLE S	COOPER, SHIRLEY T	6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	3800 COMMERCE AVE	62 NAME	
STREET ADDRESS	FAIRFIELD AL	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)(k), 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: *J.W. Brandon, Jr.* **J.W. BRANDON, JR.** 3/27/95 205/180-2191

(Name) (Date) (Telephone)