

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G58215

FILED
May 01, 2005
Secretary of State

Entity Name: MOODY TRUCK CENTER, INC.

Current Principal Place of Business:

4500 PHILIPS HIGHWAY
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

PO BOX 10095
JACKSONVILLE, FL 322470095

New Mailing Address:

FEI Number: 59-2320254 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOODY, R.M.
4500 PHILIPS HIGHWAY
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DC () Delete
Name: MOODY, R.M.
Address: 4500 PHILIPS HIGHWAY
City-St-Zip: JACKSONVILLE, FL 32207

Title: P () Delete
Name: MOODY, R.M. JR.,
Address: 8429 PLANTATION RD.
City-St-Zip: MACLENNEY, FL 32063

Title: VP () Delete
Name: MOODY, JOHN C.,
Address: 14840 PLUMOSA DRIVE
City-St-Zip: JACKSONVILLE, FL 32225

Title: VP () Delete
Name: MOODY, JASON S.,
Address: 134444 FOXHAVEN DR. SOUTH
City-St-Zip: JACKSONVILLE, FL 32224

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: R. M. MOODY JR.

_____ Electronic Signature of Signing Officer or Director

P

05/01/2005

_____ Date