

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H99411

FILED  
Mar 26, 2009  
Secretary of State

Entity Name: PEARCE WORLDWIDE LOGISTICS INC.

## Current Principal Place of Business:

150 W STATE RD 546  
P.O. BOX 1477  
LAKE HAMILTON, FL 33851 US

## New Principal Place of Business:

150 W STATE RD 546  
LAKE HAMILTON, FL 33851 US

## Current Mailing Address:

P O BOX 1477  
HAINES CITY, FL 33845 US

## New Mailing Address:

PO BOX 307  
BRENTWOOD, TN 37024 US

FEI Number: 59-2628834

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

MULLEN, KIM  
150 W SR 546  
LAKE HAMILTON, FL 33851 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: P ( ) Delete  
Name: PEARCE, KEVIN E.  
Address: 616 GOODSPRINGS RD.  
City-St-Zip: BRENTWOOD, TN 37027

Title: V ( ) Delete  
Name: MULLEN, KIMBERLY  
Address: 56 S KIDMORE RD.  
City-St-Zip: WINTER HAVEN, FL 33884

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: PEARCE, KEVIN E.  
Address: 616 GOODSPRINGS RD.  
City-St-Zip: BRENTWOOD, TN 37027

Title: VP (X) Change ( ) Addition  
Name: PEARCE, JOSHUA W  
Address: 150 SR 546 WEST  
City-St-Zip: LAKE HAMILTON, FL 33851

Title: SEC ( ) Change (X) Addition  
Name: PEARCE, SUSAN H  
Address: 616 GOOD SPRINGS ROAD  
City-St-Zip: BRENTWOOD, TN 37027

Title: TREA ( ) Change (X) Addition  
Name: MULLEN, KIM J  
Address: 56 SKIDMORE ROAD  
City-St-Zip: WINTER HAVEN, FL 33851

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: KEVIN PEARCE

PRES

03/26/2009

Electronic Signature of Signing Officer or Director

Date