


2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED
May 13, 2005 08:00 AM
Secretary of State**

DOCUMENT # P03000108402
1. Entity Name
FLETCHER'S HAULING, INC.



Principal Place of Business 1950 FLASHY LANE MALABAR, FL 32950	Mailing Address 1950 FLASHY LANE MALABAR, FL 32950
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05102005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 05-0589582	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FLETCHER, BRUCE E
1950 FLASHY LANE
MALABAR, FL 32950

DO NOT WRITE IN THIS SPACE

B. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTD FLETCHER, BRUCE E 1950 FLASHY LANE MALABAR, FL 32950
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD FLETCHER, PATRICIA 1950 FLASHY LANE MALABAR, FL 32950
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05/13/05-80003-018 150.00

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12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Bruce E Fletcher BRUCE E FLETCHER 5-10-05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #