## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000000516

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

APOPKA, FL 32703

GOSSETT, WADE A V/P

6042 TREMAYNE DR

MT. DORA, FL 32757

() Delete

VΡ

FILED Apr 16, 2008 Secretary of State

Entity Nar	me: PENINS	SULA LOGISTICS, INC.					
Current Principal Place of Business:				New Principal Place of Business:			
31545 CR SORRENT	437 O, FL 32776	<b>&gt;</b>					
Current Mailing Address:				New Mailing Address:			
	JNTY RD 43 <sup>-</sup> -O, FL 32776						
FEI Number:	: 41-2120506	FEI Number Applied For (	) FEI Nun	nber Not Appl	icable ( )	Certificate of Status Desired	d()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
GOSSETT 31545 CR SORRENT		S US					
	named entity e of Florida.	submits this statement for	the purpose o	f changing i	ts registere	ed office or registered agent,	or both,
SIGNATUR	RE:						
	Electro	onic Signature of Registered	d Agent			Date	
Election Car	npaign Financi	ng Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:				ADDITION	S/CHANG	ES TO OFFICERS AND DIR	RECTORS:
Title: Name: Address: City-St-Zip:	DP ( GOSSETT, DI 31545 CR 43 SORRENTO,	7		Title: Name: Address: City-St-Zip:	31545 CR 4	(X) Change ( ) Addition DUANE PRES 437 D, FL 32776	
Title: Name: Address: City-St-Zip:	GOSSETT, JO 1695 GOLF G APOPKA, FL			Title: Name: Address: City-St-Zip:	1695 GOLF APOPKA, F		
Title: Name: Address:	ROWE, MICH	) Delete AEL S V/P DE BOUL EVARD		Title: Name: Address:	,	(X) Change ( ) Addition CHAEL S V/P DOE BOULEVARD	

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.

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

APOPKA, FL 32703

() Change () Addition

SIGNATURE: JOYCE GOSSETT SEC 04/16/2008