

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000012662

Entity Name: HUSKER'S HAULIN, INC.

FILED  
May 13, 2008  
Secretary of State

**Current Principal Place of Business:**

502 E. PARK DR.  
LARGO, FL 33771

**New Principal Place of Business:**

**Current Mailing Address:**

502 E. PARK DR.  
LARGO, FL 33771

**New Mailing Address:**

FEI Number: 55-0889957

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HARTING, SHEREE  
502 E. PARK DR.  
LARGO, FL 33771 US

**Name and Address of New Registered Agent:**

ANSON, MARY  
502 E. PARK DR.  
LARGO, FL 33771 US

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: MARY ANSON

05/13/2008

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ( )

**OFFICERS AND DIRECTORS:**

Title: P/D ( ) Delete  
Name: ANSON, MARY  
Address: 502 E. PARK DR.  
City-St-Zip: LARGO, FL 33771

Title: VP/D ( ) Delete  
Name: HARTING, SHEREE  
Address: 502 E. PARK DR.  
City-St-Zip: LARGO, FL 33771

Title: T ( ) Delete  
Name: ANSON, MARY  
Address: 502 E. PARK DR.  
City-St-Zip: LARGO, FL 33771

Title: S ( ) Delete  
Name: HARTING, SHEREE  
Address: 502 E. PARK DR.  
City-St-Zip: LARGO, FL 33771

**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 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: MARY ANSON

PRES

05/13/2008

Electronic Signature of Signing Officer or Director

Date