

2007 FOR PROFIT CORPORATE ANNUAL REPORT

FILED
Apr 23, 2007 08:00 AM
Secretary of State

DOCUMENT # P94000027943

1. Entity Name
CHAPARRAL TRUCKING, INC.



Principal Place of Business

Mailing Address

13950 62ND ST. NORTH
 CLEARWATER, FL 34620

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 CLEARWATER, FL 34620



01232007 No Chg P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3244025** Applied For Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

CHISHOLM, RUSTY
 9036 127TH ST
 SEMINOLE, FL 34646

DO NOT WRITE IN THIS SPACE

8. 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 reappointing)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE **P**
 NAME **CHISHOLM, RUSTY**
 STREET ADDRESS **9036 127TH ST**
 CITY-ST-ZIP **SEMINOLE, FL**

TITLE **VP**
 NAME **CHISHOLM, KARAN**
 STREET ADDRESS **9036 127TH ST**
 CITY-ST-ZIP **SEMINOLE, FL**

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Karan L Chisholm* **Karan L Chisholm** **4-19-07** **727-531-6300**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #