## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED** Feb 27, 2004 08:00 AM

Daytime Phone #

DOCUMENT # P9600008761  1. Entity Name BLUERIVER TRUCKING, INC.				Secretary of State
Principal Place P.O. BOX 117 FORT PIERCE	78	Mailing Address P.O. BOX 1178 FORT PIERCE, FL 34954		+ (1554)  454  474  474  474  474  474  474
DO NOT WRITE IN THIS SPACE			CE	01302004 No Chg-P CR2E034 (10/03)  4. FEI Number
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WUCHTE, RONALD 1155 JENKIN RD. FT. PIERCE, FL 34981				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 late if applicable. (NOTE, Registered Agent signature regulared when registered).  OATE				
FILE NOW!!! FEE IS \$150.00  After May 1, 2004 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.   Added to Fees				
10.	OFFICERS A	ND DIRECTORS	Ī	
NAME STREET ADDRESS CITY-ST-ZIP	WUCHTE, RONALD 10751 ORANGE AVE. FT. PIERCE, FL VPS			U00000068962 02/27/04-80062-023 150.00
NAME STREET ADDRESS CITY-ST-ZIP	WUCHTE, JOHN 10751 ORANGE AVE. FT. PIERCE, FL		<u></u>	02/2//04-80052-023 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		, 		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
12. I hereby certify that the information supplied with this filling 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: Karle Ville 3-21-04 SIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DELLE DELL				