2006 FOR PROFIT CORPORATION

FILED Jan 27, 2006 08:00 AN Secretary of State

ANNUAL REPORT					
DOCUMENT # 157959 1. Entity Name TRI-STATE TRAILER SALES INC	,				
Principal Place of Business	Mailing Address	 			
330 S PINEAPPLE STE 106	330 S. PINEAPPLE AVE., STE 106				

DO NOT WRITE IN THIS SPACE	DO	NOT	WRITE	IN THIS	SPACE
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE

6. Name and Address of Current Registered Agent

330 S. PINEAPPLE AVE., STE 106

SARASOTA, FL 34236-7020

No Chg-P 01172006 CR2E034 (11/05)

Applied For 4. FEI Number 59-0596604 Not Applicable

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

PIPER, ROBERT H JR 330 S PINEAPPLE STE 106 SARASOTA, FL 34236-7020

the obligations of registered agent.

SIGNATURE:

SARASOTA, FL 34236-7020

DO NOT WRITE IN THIS SPACE

SIGNATURE						
FILE NOWILL FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		Election Campaign Finance Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	U00000403139 02/03/06-80035-008 150.00	
10.	ÖFFICERS AND DIREC	TORS			· · · · · · · · · · · · · · · · · · ·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CALDWELL, CHARLES S 1416 WIND RIDGE AVE BOWLING GREEN, KY 421041055					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD REYNOLDS, LEROND 1006 MEADOWLANE DR CAVE CITY, KY 421278848	,				
TITLE NAME STREET ADDRESS CTTY-ST-ZIP	SD LEONARD, JANET H 1424 WIND RIDGE AVENUE BOWLING GREEN, KY 421041055		DO NOT WRITE IN THIS SPACE			
TIFLE NAME STREET ADDRESS CITY-ST-ZIP	AT PIPER, ROBERT H JR 330 S PINEAPPLE STE 106 SARASOTA, FL 342367020					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				· <u>-</u> -		
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
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.						

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