


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 19, 2007 8:00 am**  
**Secretary of State**

04-19-2007 90182 016 \*\*\*150.00

DOCUMENT # 193548

Entity Name  
**LAND TRUCKING CO.**



Principal Place of Business Mailing Address

**JESSIE ST** **P.O. BOX 2620**  
**JACKSONVILLE, FL 32209 US** **JACKSONVILLE, FL 32203**

**40068935**



04112007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-0785518</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**DUKE, THOMAS A**  
**1560 JESSIE ST.**  
**JACKSONVILLE, FL 32206**

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I, the above named, hereby 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 the registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed, printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE \$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

OFFICERS AND DIRECTORS	
TITLE	CD
NAME	DUKE, THOMAS S
STREET ADDRESS	1560 JESSIE ST JACKSONVILLE, FL 32206
TITLE	PD
NAME	DUKE, BRIAN T.
STREET ADDRESS	1560 JESSIE ST JACKSONVILLE, FL 32206
TITLE	VSD
NAME	DUKE, STEPHEN T.
STREET ADDRESS	1560 JESSIE ST JACKSONVILLE, FL 32206
TITLE	
NAME	
STREET ADDRESS	

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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, on attachment with an address with all other like empowered.

SIGNATURE: Thomas A. Duke **4/12/07** **9043534841x3507**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

**Thomas A. Duke**