## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 273316** 

Entity Name: COMMERCIAL TRUCK TERMINAL INC

FILED Apr 27, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

35647 HWY 27 132 EAST MAIN STREET HAINES CITY, FL 33844 DUNDEE, FL 33838

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 397 HAINES CITY, FL 338450397 US

FEI Number: 59-1011385 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

PARTON, RICK
35647 HWY. 27 NORTH
HAINES CITY, FL 33844 US

PARTON, RICK
3295 PARTON RANCH ROAD
HAINES CITY, FL 33844 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: RICK PARTON 04/27/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P () Delete
 Title:
 P (X) Change () Addition

 Name:
 PARTON, RICK
 Name:
 PARTON, RICK

 Address:
 35647 HWY 27
 Address:
 3295 PARTON RANCH

Address: 35647 HVVY 27 Address: 3295 PARTON RAINCH
City-St-Zip: HAINES CITY, FL 33844 City-St-Zip: HAINES CITY, FL 33844

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition Name: PARTON, JEFF Name: PARTON, JEFF

 Name:
 PARTON, JEFF
 Name:
 PARTON, JEFF

 Address:
 35647 HWY 27
 Address:
 3234 PARTON RANCH ROAD

 City-St-Zip:
 HAINES CITY, FL 33844
 City-St-Zip:
 HAINES CITY, FL 33844

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: RICK PARTON P 04/27/2009