

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711268

FILED
Apr 22, 2008
Secretary of State

Entity Name: FLORIDA TRUCKING ASSOCIATION, INC.

Current Principal Place of Business:

350 EAST COLLEGE AVENUE
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

350 EAST COLLEGE AVENUE
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: 59-0248607

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAJCHEL, MARY LOU
350 EAST COLLEGE AVENUE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: BROWN, CHARLIE
Address: 2200 WEST LANDSTREET ROAD
City-St-Zip: ORLANDO, FL 32809 US

Title: CED () Delete
Name: SHULER, RICHARD
Address: P. O. BOX 407
City-St-Zip: LAKELAND, FL 33802 US

Title: VCD () Delete
Name: WALPOLE, KEITH
Address: P. O. BOX 1177
City-St-Zip: OKEECHOBEE, FL 34972

Title: VCD () Delete
Name: BAUGH, DANIEL
Address: P.O. BOX 188
City-St-Zip: EUSTIS, FL 32727

Title: SD () Delete
Name: HINDLE, TOM
Address: P.O. BOX 437
City-St-Zip: MULBERRY, FL 33860

Title: TRD () Delete
Name: PRITCHETT, PHILLIP
Address: P.O. BOX 311
City-St-Zip: MULBERRY, FL 32054

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: SCHULER, RICHARD
Address: P. O. BOX 32024
City-St-Zip: LAKELAND, FL 33802 US

Title: CED (X) Change () Addition
Name: WALPOLE, KEITH
Address: P. O. BOX 1177
City-St-Zip: OKEECHOBEE, FL 34972 US

Title: VCD (X) Change () Addition
Name: BAUGH, DANIEL
Address: P. O. BOX 188
City-St-Zip: EUSTIS, FL 32727

Title: VCD (X) Change () Addition
Name: HINDLE, TOM
Address: P. O. BOX 67
City-St-Zip: AUBURNDAL, FL 33823

Title: SD (X) Change () Addition
Name: PRITCHETT, PHILLIP
Address: P. O. BOX 311
City-St-Zip: LAKE BUTLER, FL 32054

Title: TRD (X) Change () Addition
Name: ROB, CARRYL
Address: 219 EDGEWOOD AVENUE SOUTH
City-St-Zip: JACKSONVILLE, FL 32254

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARY LOU RAJCHEL, PRESIDENT & CEO

PRES

04/22/2008

Electronic Signature of Signing Officer or Director

Date