2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 855286

Entity Name: PATACO TRUCKING, INC.

FILED Apr 01, 2005 Secretary of State

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

5741 WESTPORT LN 1507 WHISPERING OAKS CIRCLE NAPLES, FL 34116

NAPLES, FL 34110

Current Mailing Address: New Mailing Address:

PO BOX 990327

NAPLES, FL 34116 US

FEI Number: 61-0988901 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:

CORPORATE REGISTERED AGENT, LLC SLACK, MARK 801 ANCHOR RODE DRIVE 5147 CASTELLO DR.

NAPLES, FL 34103 NAPLES, FL 34103 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: MARK A SLACK, AS ITS V PRESIDENT 04/01/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

JONES, PATRICK F, JONES, PATRICK F, Name: Name: 5741 WESTPORT LANE 1507 WHISPERING OAKS CIR. Address: Address:

NAPLES, FL 34110 City-St-Zip: NAPLES, FL 34116 City-St-Zip:

Title: Title: () Delete (X) Change () Addition Name: JONES, CHRISTINE Name: CHASE, STEVE

440 BATTERSEA CT 3570 15TH AVE. S.W. Address: Address: MARCO, FL 34145 NAPLES, FL 34117 City-St-Zip: City-St-Zip:

Title: Title: (X) Change () Addition SD () Delete DST

JONES, CHRISTINE, JONES, CHRISTINE Name: Name: 440 BATTERSEA CT 440 BATTERSEA CT Address: Address: City-St-Zip: MARCO, FL 34145 City-St-Zip: MARCO, FL 34145

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PATRICK JONES DP 04/01/2005