

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000000144

Entity Name: CARLYLE VAN LINES, INC.

FILED
Jun 29, 2011
Secretary of State

Current Principal Place of Business:

801 WEST YOUNG
WARRENSBURG, MO 64093

New Principal Place of Business:

Current Mailing Address:

801 WEST YOUNG
WARRENSBURG, MO 64093

New Mailing Address:

PO BOX 47
WARRENSBURG, MO 64093

FEI Number: 43-1216832

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LESKY, CRAIG
3009 NW 25TH AVE.
POMPANO BEACH, FL 33069 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: PRES
Name: CARLYLE, ROY H
Address: 209 NW 21
City-St-Zip: WARRENSBURG, MO 64093

Title: EXVP
Name: CARLYLE, BILL F JR
Address: 249 SW 21
City-St-Zip: WARRENSBURG, MO 64093

Title: VP
Name: FOCKLER, TERRY JEAN
Address: 645 NW 100 CENTERVIEW
City-St-Zip: WARRENSBURG, MO 64019

Title: DIR
Name: CARLYLE, SUSAN M
Address: 1705 SUNSET DR
City-St-Zip: WARRENSBURG, MO 64093

Title: VP
Name: CARLYLE, LARRY D
Address: 518 W CLARK
City-St-Zip: WARRENSBURG, MO 64093

Title: SEC
Name: MAINARD, NANCY J
Address: 1463 NW HWY 50 W
City-St-Zip: HOLDEN, MO 64040

I hereby 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 all other like empowered.

SIGNATURE: BILL F. CARLYLE

EXVP

06/29/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date