

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000004684

FILED  
May 07, 2010  
Secretary of State

Entity Name: BAYOU CADDY TRUCKING INC.

## Current Principal Place of Business:

210 HIGHWAY 90  
STE E  
WAVELAND, MS 39576

## New Principal Place of Business:

5200 SHIPYARD RD  
LAKESHORE, MS 39558

## Current Mailing Address:

P.O. BOX 44  
LAKESHORE, MS 39558

## New Mailing Address:

FEI Number: 64-0827282

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

A1A REGISTERED AGENT INC  
5647 110TH AVE. NORTH  
ROYAL PALM BEACH, FL 334110000 US

## Name and Address of New Registered Agent:

A1A REGISTERED AGENT INC  
5647 110TH AVENUE NORTH  
ROYAL PALM BEACH, FL 33411 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:

05/07/2010

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D  
Name: CURE, MICHAEL  
Address: P.O. BOX 44  
City-St-Zip: LAKESHORE, MS 39558

Title: D  
Name: RUTHERFORD, CYNTHIA C  
Address: P.O. BOX 44  
City-St-Zip: LAKESHORE, MS 39558

Title: D  
Name: CURE, JOSEPH R  
Address: P.O. BOX 44  
City-St-Zip: LAKESHORE, MS 39558

Title: D  
Name: GOLLOTT, SUSAN C  
Address: P.O. BOX 44  
City-St-Zip: LAKESHORE, MS 39558

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: JOSEPH R CURE

D

05/07/2010

Electronic Signature of Signing Officer or Director

Date