

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000004684

FILED
Jan 30, 2012
Secretary of State

Entity Name: BAYOU CADDY TRUCKING INC.

Current Principal Place of Business:

5200 SHIPYARD RD
LAKESHORE, MS 39558

New Principal Place of Business:

5200 SHIPYARD ROAD
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 (X)**

Name and Address of Current Registered Agent:

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

01/30/2012

Electronic Signature of Signing Officer or Director

Date