

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000007078

FILED
Jul 24, 2007
Secretary of State

Entity Name: TEAMSTS, INC.

Current Principal Place of Business:

6315 CANAL RD
PALMETTO, FL 34221

New Principal Place of Business:

Current Mailing Address:

6315 CANAL RD
PALMETTO, FL 34221

New Mailing Address:

PO BOX 237
RICHMOND, KY 40475

FEI Number: 61-1250485

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TREALOUT, CLIFFORD
6315 CANAL RD
PALMETTO, FL 34221 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

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: PC () Delete
Name: SINGLETON, STEVEN S
Address: 225 BARROWS RD
City-St-Zip: LEXINGTON, KY 40502

Title: VD () Delete
Name: CLARK, BILL
Address: 107 UNION CT
City-St-Zip: RICHMOND, KY 40475

Title: ST () Delete
Name: RITCHIE, FREDONNA S
Address: 1294 MCKEE RD
City-St-Zip: BERE A, KY 40403

Title: VC () Delete
Name: FOUNTAIN, KENNETH
Address: 1904 PALLIDIAN DR.
City-St-Zip: FLORENCE, KY 41042

Title: D () Delete
Name: KAUFMANN, BEN
Address: 352 S. BROADWAY
City-St-Zip: LEXINGTON, KY 40508

Title: D () Delete
Name: CLARK, BILL
Address: 107 UNION CT
City-St-Zip: RICHMOND, KY 40475

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

SIGNATURE: WILLIAM H G CLARK

MR.

07/24/2007

Electronic Signature of Signing Officer or Director

Date