

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000005419

FILED
Jan 16, 2009
Secretary of State

Entity Name: SMC DRAGLINE SERVICE INC.

Current Principal Place of Business:

193 COTTONWOOD LOOP
MADISONVILLE, KY 42431

New Principal Place of Business:

1285 JOHN LANSDEN ROAD
NEBO, KY 42441

Current Mailing Address:

POST OFFICE BOX 1095
MADISONVILLE, KY 42431

New Mailing Address:

FEI Number: 75-3219264 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: MILLER, GENE
Address: 224 KIRKHAVEN WAY
City-St-Zip: MT STERLING, KY 40353

Title: CV () Delete
Name: SHADRICK, B J
Address: 193 COTTONWOOD LOOP
City-St-Zip: MADISONVILLE, KY 42431

Title: DST () Delete
Name: SHADRICK, TONI
Address: 193 COTTONWOOD LOOP
City-St-Zip: MADISONVILLE, KY 42431

Title: D () Delete
Name: MILLER, NANCY
Address: 224 KIRKHAVEN WAY
City-St-Zip: MT STERLING, KY 40353

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: CV (X) Change () Addition
Name: SHADRICK, B J
Address: 1285 JOHN LANSDEN ROAD
City-St-Zip: NEBO, KY 42441

Title: DST (X) Change () Addition
Name: SHADRICK, TONI
Address: 1285 JOHN LANSDEN ROAD
City-St-Zip: NEBO, KY 42441

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: TONI SHADRICK

DST

01/16/2009

Electronic Signature of Signing Officer or Director

Date