

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008 8:00 am
Secretary of State

04-14-2008 90024 040 ***150.00

DOCUMENT # F07000002803

1. Entity Name

E & C CONGDON TRUCKING, INC.



Principal Place of Business

11935 CR 656 H
WEBSTER, FL 33597

Mailing Address

7529 SUSSEX DRIVE STE 100
FLORENCE, KY 41042

40066785



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04032008

Chg-P

CR2E034 (12/06)

4. FEI Number

61-1470324

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CONGDON, CATHERINE
11935 CR 656 H
WEBSTER, FL 33597

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent, and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE CDP
NAME CONGDON, CATHERINE
STREET ADDRESS 11935 CR 656 H
CITY-ST-ZIP WEBSTER, FL 33597

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE V
NAME CONGDON, ERNEST
STREET ADDRESS 11935 CR 656 H
CITY-ST-ZIP WEBSTER, FL 33597

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☐ Change

☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Catherine Congdon
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/08
Date

352-793-8518
Daytime Phone #