2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2006 08:00 AM
Secretary of State

DOCUMENT # F76808

1. Entity Name
DUPONT TRUCKING, INC.

Principal Place of Business	Mailing Address
624 PAT THOMAS PARKWAY QUINCY, FL 32351 US	PO BOX 60 QUINCY, FL 32353-0060 US

03292006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2254720
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

DUPONT, JANEY B
624 PAT THOMAS PARKWAY
QUINCY, FL 32353-0060

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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, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	SD
NAME	DUPONT-SAILOR, NATALIE J
STREET ADDRESS	3107 RACKLEY DR
CITY-ST-ZIP	TALLAHASSEE, FL 32305
TITLE	VDM
NAME	DUPONT, NATHANIEL, JR.
STREET ADDRESS	820 MARTIN LUTHER KING JR BLVD
CITY-ST-ZIP	QUINCY, FL 32351
TITLE	DP
NAME	DUPONT, JANEY B
STREET ADDRESS	624 PAT THOMAS PARKWAY
CITY-ST-ZIP	QUINCY, FL 32351
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/13/06-80010-004 158.75

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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: Janey B. DuPont Janey B. DuPont 3/29/06 (850) 627-7283
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #