

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000000029

FILED
Jan 03, 2008
Secretary of State

Entity Name: SMITHWAY MOTOR XPRESS, INC.

Current Principal Place of Business:

2031 QUAIL AVENUE
FORT DODGE, IA 50501 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 404
FORT DODGE, IA 50501 US

New Mailing Address:

FEI Number: 42-1009113 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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: P () Delete
Name: OWENS, G. LARRY
Address: 1161 FOX RIDGE ROAD
City-St-Zip: FORT DODGE, IA 50501

Title: V () Delete
Name: OWENS, G. LARRY
Address: 1161 FOX RIDGE ROAD
City-St-Zip: FORT DODGE, IA 50501

Title: T () Delete
Name: SANDVIG, DOUGLAS C
Address: 1320 N 29TH STREET
City-St-Zip: FORT DODGE, IA 50501

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SANDVIG, DOUGLAS C
Address: 2031 QUAIL AVENUE
City-St-Zip: FORT DODGE, IA 50501

Title: V (X) Change () Addition
Name: JOHNSON, CHAD A
Address: 2031 QUAIL AVENUE
City-St-Zip: FORT DODGE, IA 50501

Title: T (X) Change () Addition
Name: SANDVIG, DOUGLAS C
Address: 2031 QUAIL AVENUE
City-St-Zip: FORT DODGE, IA 50501

Title: V () Change (X) Addition
Name: PRICKETT, RICHARD L JR
Address: 7135 CENTENNIAL PLACE
City-St-Zip: NASHVILLE, TN 37209

Title: S () Change (X) Addition
Name: BRADLEY, ISHAM B
Address: 7135 CENTENNIAL PLACE
City-St-Zip: NASHVILLE, TN 37209

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: DOUGLAS C. SANDVIG

P

01/03/2008

Electronic Signature of Signing Officer or Director

Date