

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000005126

Entity Name: CAPSCO INDUSTRIES, INC.

FILED  
Jan 30, 2008  
Secretary of State

## Current Principal Place of Business:

155 MAIN ST  
SUMITON, AL 35148

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 640  
SUMITON, AL 35148

## New Mailing Address:

FEI Number: 63-1113319

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SAUCER, RICHARD  
1005 PORTER ST  
ST GEORGE ISLAND, FL 32328 US

## Name and Address of New Registered Agent:

COX, CHARLIE  
8445 ADAMO DRIVE  
TAMPA, FL 33619 US

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: CHARLIE COX

01/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: C ( ) Delete  
Name: KILLION, CHRIS  
Address: 155 MAIN STREET  
City-St-Zip: SUMITON, AL 35148

Title: PD ( ) Delete  
Name: MCILVEENE, LOYE  
Address: 155 MAIN STREET  
City-St-Zip: SUMITON, AL 35148

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CHAI (X) Change ( ) Addition  
Name: KILLION, CHRIS  
Address: 155 MAIN STREET  
City-St-Zip: SUMITON, AL 35148

Title: PRES (X) Change ( ) Addition  
Name: MCILVEENE, LOYE  
Address: 155 MAIN STREET  
City-St-Zip: SUMITON, AL 35148

Title: VPRE ( ) Change (X) Addition  
Name: TAYLOR, TOM  
Address: 155 MAIN STREET  
City-St-Zip: SUMITON, AL 35148

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: LOYE MCILVEENE

PRES

01/30/2008

Electronic Signature of Signing Officer or Director

Date