

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G57177

FILED
Feb 16, 2006
Secretary of State

Entity Name: JACK H. SMITH TRUCKING, INC.

Current Principal Place of Business:

1505 SE 40TH ST D
PO BOX 150046
CAPE CORAL, FL 33904 US

New Principal Place of Business:

3124 RIVER GROVE CIRCLE
FORT MYERS, FL 33905 US

Current Mailing Address:

3124 RIVER GROVE CIRCLE
FORT MYERS, FL 33905

New Mailing Address:

FEI Number: 59-2340068 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATNEY, KATHLEEN
3124 RIVER GROVE CIRCLE
FORT MYERS, FL 33905 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: PD () Delete
Name: MATNEY, KATHLEEN
Address: 3124 RIVER GROVE CIRCLE
City-St-Zip: FORT MYERS, FL 33905

Title: VPD () Delete
Name: MATNEY, KATHLEEN,
Address: 3124 RIVER GROVE CIRCLE
City-St-Zip: FORT MYERS, FL 33905

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: KATHLEEN M. MATNEY

PD

02/16/2006

Electronic Signature of Signing Officer or Director

Date