2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G74419

Entity Name: MAGIC TILT TRAILERS INC

FILED Jul 08, 2008 Secretary of State

Titley Ita	1417 (010 1	ier moneemo, mo.		
Current Principal Place of Business:			New Principal Place of Business:	
	IS CLUB RD ATER, FL 3370	64		
Current Mailing Address:			New Mailing Address:	
	IS CLUB RD ATER, FL 3370	64		
FEI Number	: 59-2361330	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:	
	N, CRAIG IS CLUB RD ATER, FL 3376	64 US		
	e named entity : e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,
SIGNATU				
	Electror	ic Signature of Registered Ag	gent	Date
		3(2)(b), F.S., the corporation did n g Trust Fund Contribution ().	ot receive the prior notice.	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	C () CLAWSON, SC 2161 LIONS CL CLEARWATER	UB RD	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	S () LYONS, ROBE 2161 LIONS CL CLEARWATER	UB RD	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	P () CLAWSON, CR 2161 LIONS CL CLEARWATER	UB ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition

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: CRAIG CLAWSON P 07/08/2008