


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2005 08:00 AM
Secretary of State

DOCUMENT # H28329 1. Entity Name MACK'S LOADER SERVICE, INC.	
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Principal Place of Business 2700 AVENUE OF THE AMERICAS ENGLEWOOD, FL 34224 US	Mailing Address 2700 AVENUE OF THE AMERICAS ENGLEWOOD, FL 34224 US
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01042005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2457208	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MACRIS, STEVEN W.
351 WEST VENICE AVENUE
VENICE, FL 33595

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MACK, GARY A. 2700 AVENUE OF THE AMERICAS ENGLEWOOD, FL 34224
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST MACK, PATRICIA LYNNE 2700 AVENUE OF THE AMERICAS ENGLEWOOD, FL 34224
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04/13/05-80002-012 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Patricia Lynne Mack 4/11/05 944-475-1532
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #