


**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 05, 2008 8:00 am**  
**Secretary of State**

05-05-2008 90266 015 \*\*\*150.00

DOCUMENT # H70598		
1. Entity Name GREER TRUCKING COMPANY, INC.		

Principal Place of Business 6975 WEST 12TH ST JACKSONVILLE, FL 32220 US	Mailing Address 3800 N. RODNEY PARHAM ROAD #301 LITTLE ROCK, AR 72212
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**DO NOT WRITE IN THIS SPACE**



04142008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2596877	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

*Jonice Hull*  
33 LANE AVE SOUTH  
JACKSONVILLE, FL 32254

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee will be \$550.00</b>	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	<i>See Attached List</i>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Jonice Hull* *Jonice Hull* 4-29-08 501-280-0500  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

**Board of Directors and Corporate Officers  
Contractor's Holding, Inc. and Subsidiaries**

Name	Officer	Director	Address
Kevin P. Collins		X	21 Old Hill Farm Rd, Westport CT 06880
James W. Eckert		X	1061 W. Sutton Ct., Palatine IL 60067
Christopher H. Smith		X	136 Southport Woods Dr., Southport CT 06490
Denis J. Taura		Chairman	90 Montadale Dr., Princeton NJ 08540
John Y. Williams		X	Equity-South Advisors, Inc., 3399 Peachtree Rd. NE, Suite 1790, Atlanta GA 30326
Robert Y. York, Jr.		X	Churchill Capital, 333 S. 7th St., Suite 2400, Minneapolis MN 55402
Richard C. Clair	President/CEO	X	6508 Miami Bluff Drive, Mariemont OH 45227
David R. Bachman	Sr VP/Secretary		2216 Huntleigh Court Little Rock AR 72212
Brian Wilson	CFO		2401 North Pierce, Little Rock, AR 72207
Riley B. Peavy	VP		1477 Spruce Drive, Smyrna GA 30080
Steven Crossken	VP		7903 Goldeneye Ct., Greensboro, NC 27455
Robert Driver	VP		49 Mulberry Way, Dallas GA 30157
Janipe Hull	CAO		416 N. Devon, Sherwood AR 72120

ATTACHMENT  
40097886  
#H70598