

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H94184

FILED  
Jan 09, 2010  
Secretary of State

**Entity Name:** WHOLESAL TRUCKS, INC.

**Current Principal Place of Business:**

6286 PHILLIPS HWY.  
JACKSONVILLE, FL 32216

**New Principal Place of Business:**

**Current Mailing Address:**

6286 PHILLIPS HWY.  
JACKSONVILLE, FL 32216

**New Mailing Address:**

FEI Number: 59-2621214

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GOYKE, JOHN H  
6286 PHILLIPS HWY.  
JACKSONVILLE, FL 32216 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: DP  
Name: GOYKE, JOHN H.  
Address: 6286 PHILLIPS HWY.  
City-St-Zip: JACKSONVILLE, FL 32216

Title: D  
Name: GOYKE, MICHAEL R.  
Address: 6286 PHILLIPS HWY.  
City-St-Zip: JACKSONVILLE, FL 32216

Title: D V  
Name: GOYKE ANNE-MARIE  
Address: 6286 PHILLIPS HWY  
City-St-Zip: JACKSONVILLE, FL 32216

I hereby 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 all other like empowered.

SIGNATURE: JOHN H. GOYKE

DP

01/09/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date