


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 02, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # J10793</b>	
1. Entity Name SILVER EAGLE EXPRESS, INC.	

Principal Place of Business 1020 OSAGE STREET CLEARWATER, FL 33755 US	Mailing Address 1020 OSAGE STREET CLEARWATER, FL 33755 US
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**DO NOT WRITE IN THIS SPACE**

03242005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2664982	Applied For Not Applicable
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

WILLIAMS, ALBERT C., JR.  
1311 N. WESTSHORE BLVD.  
SUITE 313  
TAMPA, FL 33607

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstalling)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

000007285054

04/02/05 20030-009 150.00

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RUBRIGHT, DAVID J. 4505 12 O'CLOCK KNOB ROAD ROANAKE, VA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V RUBRIGHT, STACEY B. 4505 12 O'CLOCK KNAB ROAD ROANAKE, VA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DAVID RUBRIGHT

Date

7-24-05

Daytime Phone #

727-442-6267