

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K25775

FILED
Jan 05, 2009
Secretary of State

Entity Name: S.M. BRITT HAULING, INC.

Current Principal Place of Business:

S. M. BRITT HAULING, INC.
7027 C.R. 763
BUSHNELL, FL 33513 US

New Principal Place of Business:

7027 C.R. 763
BUSHNELL, FL 33513 US

Current Mailing Address:

305 SOUTHLAND PL
7027 C.R. 763
BUSHNELL, FL 33513 US

New Mailing Address:

305 SOUTHLAND PL
BUSHNELL, FL 33513 US

FEI Number: 59-2901215

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEPHENS, CARL
6608C-476A
BUSHNELL, FL 33513 US

Name and Address of New Registered Agent:

ALL FLORIDA FIRM, INC
813 DELTONA BLVD STE A
BOX 1356368
DELTONA, FL 32725 US

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: CHRISTINA CLARK FOR ALL FLORIDA FIRM, INC

01/05/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: STEPHENS, CARL
Address: 6608C- 476A
City-St-Zip: BUSHNELL, FL 33513

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: STEPHENS, CARL
Address: 6608C- 478A
City-St-Zip: BUSHNELL, FL 33513

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: CHRISTINA CLARK FOR CARL STEPHENS

P

01/05/2009

Electronic Signature of Signing Officer or Director

Date