

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K33109

FILED  
Apr 14, 2006  
Secretary of State

Entity Name: MCROY RURAL ROADS & LOT CLEARING, INC.

**Current Principal Place of Business:**

125 CALADIUM ROW  
SEBRING, FL 33875

**New Principal Place of Business:**

**Current Mailing Address:**

125 CALADIUM ROW  
SEBRING, FL 33875

**New Mailing Address:**

FEI Number: 65-0089508

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MCROY, JAMES M.  
125 CALADIUM ROW  
SEBRING, FL 33875 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: PD ( ) Delete  
Name: MCROY, JAMES M.,  
Address: 125 CALADIUM ROW  
City-St-Zip: SEBRING, FL

Title: VST ( ) Delete  
Name: MCROY, LOIS ARLENE,  
Address: 125 CALADIUM ROW  
City-St-Zip: SEBRING, FL

Title: D ( ) Delete  
Name: MCROY, LOIS ARLENE,  
Address: 125 CALADIUM ROW  
City-St-Zip: SEBRING, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: MCROY, JAMES M.,  
Address: 125 CALADIUM ROW  
City-St-Zip: SEBRING, FL 33875

Title: VST (X) Change ( ) Addition  
Name: MCROY, LOIS ARLENE,  
Address: 125 CALADIUM ROW  
City-St-Zip: SEBRING, FL 33875

Title: D (X) Change ( ) Addition  
Name: MCROY, LOIS ARLENE,  
Address: 125 CALADIUM ROW  
City-St-Zip: SEBRING, FL 33875

I hereby certify that the information supplied with this filing does not qualify for the 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: LOIS ARLENE MCROY

VST

04/14/2006

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

\_\_\_\_\_  
Date