

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K65571

FILED
Jan 18, 2005
Secretary of State

Entity Name: L.R.E. GROUND SERVICES, INC.

Current Principal Place of Business:

21196 POWELL ROAD
BROOKSVILLE, FL 34604 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 10263
BROOKSVILLE, FL 34603 US

New Mailing Address:

FEI Number: 59-2932603

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOOLEVER, SUSAN L.
21196 POWELL ROAD
BROOKSVILLE, FL 34604 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: DST () Delete
Name: WOOLEVER, SUSAN L
Address: 2008 NW 15TH STREET
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: PD () Delete
Name: WOOLEVER, RAYMOND D
Address: 2008 NW 15TH STREET
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: EXVP () Delete
Name: WOOLEVER, SUSAN L
Address: 2008 N.W. 15TH STREET
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: V () Delete
Name: CANOVA, DARLE M
Address: 13027 BRIDLE PATH
City-St-Zip: BROOKSVILLE, FL 34601

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SUSAN L WOOLEVER

EXVP

01/18/2005

Electronic Signature of Signing Officer or Director

Date