2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K84718

FILED Mar 02, 2006 Secretary of State

Entity Name: L.M. GENTRY TRUCK & EQUIPMENT SALES INC.

| Jurrent P | rincipal Place | of Business: | New Principal Place | of Business: |
|---|--|--|--|--|
| 10710 WALKER ROAD THONOTOSASSA, FL 33592 | | | 11704 JACKSON ROAD THONOTOSASSA, FL 33592 | |
| Current N | lailing Addres | s: | New Mailing Addres | ss: |
| | LKER ROAD DSASSA, FL 3: | 3592 | 2010 RUSSELL DR. TAMPA, FL 33618 | |
| El Number | : 59-2944481 | FEI Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired (X) |
| Name and | Address of C | urrent Registered Agent: | Name and Address | of New Registered Agent: |
| GENTRY, 1615 CED AKE PLA | | US | | |
| TI I | named entity s | ubmits this statement for the p | urpose of changing its registere | ed office or registered agent, or both, |
| | e of Florida. | | | |
| | e of Florida. | | | |
| n the State | e of Florida. | ic Signature of Registered Age | nt | Date |
| n the State | e of Florida. RE: Electron | ic Signature of Registered Age | nt | Date |
| n the State | e of Florida. RE: Electron | Trust Fund Contribution (). | | Date SES TO OFFICERS AND DIRECTORS |
| n the State BIGNATUI Election Car DFFICER: Title: Jame: Address: | e of Florida. RE: Electron mpaign Financing S AND DIREC | Trust Fund Contribution (). FORS: Delete S M T. | | |
| n the State | e of Florida. RE: Electron mpaign Financing S AND DIREC DP () GENTRY, LOUIS 1615 CEDER S' LAKE PLACID, I | Trust Fund Contribution (). FORS: Delete 5 M T. FL 33852 Delete 7 I | ADDITIONS/CHANG Title: Name: Address: | ES TO OFFICERS AND DIRECTOR |
| n the State BIGNATUI Election Car DFFICER Title: lame: kddress: lame: kddress: kddress: | e of Florida. RE: Electron mpaign Financing S AND DIRECT DP () GENTRY, LOUIS 1615 CEDER S' LAKE PLACID, I DVP () GENTRY, RUBY 1615 CEDER S' LAKE PLACID, I | Trust Fund Contribution (). FORS: Delete 5 M T. FL 33852 Delete 7 I T. FL 33852 Delete AYNE DR. | ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address: | SES TO OFFICERS AND DIRECTORS () Change () Addition |

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: KIMBERLY GENTRY DST 03/02/2006