


**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**PENDING**  
05-26-2005 90027 007 \*\*\*150.00  
L04000021807

**DOCUMENT #** L04000021807

**1. Entity Name**  
Pendray Trucking LLC



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

05 JUN -6 AM 9:25

40085894

**DO NOT WRITE IN THIS SPACE**

<b>2. Principal Place of Business</b> <u>Williston, FL</u>		<b>3. Mailing Address</b> <u>Pendray Trucking LLC</u>	
Suite, Apt. #, etc. <u>13550 NE 10th St</u>		Suite, Apt. #, etc. <u>13550 NE 10th St</u>	
City & State <u>Williston, FL</u>		City & State <u>Williston, FL</u>	
Zip <u>32696</u>	Country <u>USA</u>	Zip <u>32696</u>	Country <u>USA</u>

**4. FEI Number**  
02-079450

Applied For	Not Applicable
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**5. Certificate of Status Desired** ☐ **\$8.75 Additional Fee Required**

**DO NOT WRITE IN THIS SPACE**

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

Name Tori Pressley

Street Address (P.O. Box Number is Not Acceptable)  
29 Hunter Ridge Road

City Monticello FL 32344

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when re-stating) DATE \_\_\_\_\_

**January 1 - May 1 Fee is \$150.00**  
**After May 1, Fee is \$550.00**  
**Amended UBR is \$61.25**  
**Make Check Payable to Florida Department of State**

**9. Election Campaign Financing** ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>Owner</u> <u>James W. Pendray</u> <u>13550 NE 10th St.</u> <u>Williston, FL 32696</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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**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 on an attachment with an address, with all other like empowered.**

**SIGNATURE:** James W. Pendray - James W. Pendray 5-25-05 351-224-8609

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/02)