

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M66626

FILED
Apr 29, 2009
Secretary of State

Entity Name: LLOYD THIEBOLT TRUCKING, INC.

Current Principal Place of Business:

113 INDIANOLA RD
CHANDLER, TX 75758

New Principal Place of Business:

113 INDIANOLA RD
CHANDLER, TX 75758 US

Current Mailing Address:

C/O ROBERT J ELDREDGE EA
3580 E GULF TO LAKE HWY
INVERNESS, FL 34453 US

New Mailing Address:

FEI Number: 59-2907755 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELDREDGE, ROBERT J
3580 E GULF TO LAKE HWY.
INVERNESS, FL 34453 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: PSTD () Delete
Name: THIEBOLT, LLOYD
Address: 113 INDIANOLA RD
City-St-Zip: CHANDLER, TX 75758 US

Title: D () Delete
Name: THIEBOLT, VELMA
Address: 113 INDIANOLA RD
City-St-Zip: CHANDLER, TX 75758 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: LLOYD THIEBOLT

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04/29/2009

Electronic Signature of Signing Officer or Director

_____ Date