2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Feb 10, 2006 8:00 am **Secretary of State** DOCUMENT # N00000006799 02-10-2006 90022 026 ****61.25 SOUTHSIDE TRUCKERS CLUB, INC. Principal Place of Business Mailing Address 3638 - 16TH AVE. S. ST PETERSBURG FL 33711 3638 - 16TH AVE. S. ST PETERSBURG FL 33711 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) Applied For City & State City & State 4. FEI Number 65-1072679 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name COSBY, ALEXANDER Street Address (P.O. Box Number is Not Acceptable) 3638 - 16TH AVE. S. ST PETERSBURG FL 33711 City Zip Code 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 Signature, typind or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2006 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. Delete Change ■ Addition TITLE BACON, CECIL NAME 3876'34TH TERRACES 11F STREET ADDRESS STREET ADDRESS ST PETERSBURG FL 33711 City-S1-7iP CITY-ST-ZIP ☐ Change `*. ☐ Addition ВМ TITLE ☐ Delete TITLE COSBY, CAROLYN NAME NAME 3638 - 16TH AVE. S. STREET ADDRESS STREET ADDRESS ST PETERSBURG FL 33711 CITY-ST-7(P CITY-ST-7tP ☐ Addition FITLE Delete -☐ Change MCNORTON, EVELYN NAME NAME 4388 18TH AVENUE SOUTH STREET ADDRESS STREET ADDRESS CITY-ST-7IP SAINT PETERSBURG FL 33711 CITY-ST-ZIP 1 ☐ Change Addition ☐ Delete TITLE TITLE GORDON, SHAWN C NAME NAME STREET ADDRESS 5755 6TH AVENUE NORTH 50 STREET ADDRESS ST PETERSBURG FL 33711 CITY-ST-ZIP CITY-ST-ZIP □ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete TITLE ☐ Change TITLE NAME NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 is required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

1-24-06 127-321-7040

FILED