

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000034480

Entity Name: A.L.L. TRANSPORT & LEASING, INC.

FILED
Mar 24, 2009
Secretary of State

Current Principal Place of Business:

524 S. COMBEE RD
LAKELAND, FL 33801

New Principal Place of Business:

2818 S.W. BOLL WEEVIL ROAD
ARCADIA, FL 342666729 US

Current Mailing Address:

524 S. COMBEE RD
LAKELAND, FL 33801

New Mailing Address:

2818 S.W. BOLL WEEVIL ROAD
ARCADIA, FL 342666729 US

FEI Number: 59-3636550

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALL, W. CRAIG
ONE URBAN CENTRE
4830 KENNEDY BLVD STE 575
TAMPA, FL 33609 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: ALBRITTON, NORMA LAVERN
Address: 524 S. COMBEE ROAD
City-St-Zip: LAKELAND, FL 33801

Title: DP () Delete
Name: ALBRITTON, MANARD O
Address: 524 S. COMBEE ROAD
City-St-Zip: LAKELAND, FL 33801

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DST (X) Change () Addition
Name: ALBRITTON, NORMA LAVERN
Address: 2818 S.W. BOLL WEEVIL ROAD
City-St-Zip: ARCADIA, FL 342666729

Title: DP (X) Change () Addition
Name: ALBRITTON, MANARD O
Address: 2818 S.W. BOLL WEEVIL ROAD
City-St-Zip: ARCADIA, FL 342666729

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: NORMA LAVERN ALBITTON

D

03/24/2009

Electronic Signature of Signing Officer or Director

Date