

# ANNUAL REPORT

DOCUMENT # P00000067279

1. Entity Name  
SWANN TRUCK SALES, INC.



**FILED**  
**May 04, 2004 8:00 am**  
**Secretary of State**

05-04-2004 90134 016 \*\*\*150.00

Principal Place of Business  
2381 E. INTERNATIONAL SPEEDWAY BLVD.  
DELAND, FL 32724

Mailing Address  
2381 E. INTERNATIONAL SPEEDWAY BLVD.  
DELAND, FL 32724



04232004 No Chg-P CR2E034 (10/03)

4. FEI Number  
59-3665983

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

## 6. Name and Address of Current Registered Agent

SWANN, ROBERT N  
2381 E. INTERNATIONAL SPEEDWAY BLVD.  
DELAND, FL 32724

DO NOT WRITE  
IN THIS SPACE

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, type or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

## 10. OFFICERS AND DIRECTORS

TITLE PD  
NAME SWANN, ROBERT N  
STREET ADDRESS 2381 E. INTERNATIONAL SPEEDWAY BLVD.  
CITY-ST-ZIP DELAND, FL 32724

TITLE STD  
NAME SWANN, DELANEY R  
STREET ADDRESS 2381 E. INTERNATIONAL SPEEDWAY BLVD.  
CITY-ST-ZIP DELAND, FL 32724

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF REGISTERED AGENT OR DIRECTOR

4/28/04

Date

386-736-1212

Daytime Phone #