## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000075224

Entity Name: TEDDY BEAR TRUCKING, INC

801 SW ALASKA WAY

GREENVILLE, FL 32331

Address:

City-St-Zip:

FILED Apr 27, 2005 Secretary of State

Littly Na	ille. TEDDT I	SLAR TROCKING, INC.			
Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
ROUTE 3 MADISON	BOX 811 , FL 32340		731 NE ROOTMAN RD MADISON, FL 32340		
Current M	lailing Addre	ss:	New Mailing Address:		
ROUTE 3 MADISON	BOX 811 , FL 32340		731 NE ROOTMAN RD MADISON, FL 32340		
FEI Number	: 59-3671324	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of (	Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
ROUTE 3	DWIGHT LEE BOX 811 , FL 32340	US	BARBER, DWIGHT LEE 731 NE ROOTMAN RD MADISON, FL 32340	US	
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:			04/27/2005	
	Electro	nic Signature of Registered Age	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHANGES	TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P ( BARBER, DWI 731 NE ROOTI MADISON, FL	MAN RD	Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP ( BARBER, REG 731 NE ROOTI MADISON, FL	MAN RD	Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	AP ( BARBER, JAS 655 SW ALAS GREENVILLE,	KA WAY	Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition	
Title: Name:	S ( LYONS, WENI	) Delete DY	Title: ( Name:	) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Address:

City-St-Zip:

	SIGNATURE: DWIGHT LEE BARBER	MR.	04/27/2005
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