

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000084155

FILED
Apr 06, 2005
Secretary of State

Entity Name: PRIORITY DELIVERY & TRANSPORT, INC.

Current Principal Place of Business:

4344 PHILLIPS HIGHWAY
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

4344 PHILLIPS HIGHWAY
JACKSONVILLE, FL 32207

New Mailing Address:

FEI Number: 59-3670078

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLLACK, RANDY
2005 N. 43RD STREET
TAMPA, FL 33605 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: D () Delete
Name: FLOWERS, CHRISTIAN
Address: 4344 PHILLIPS HWY
City-St-Zip: JACKSONVILLE, FL 32207

Title: D () Delete
Name: FLOWERS, GEORGE
Address: 4344 PHILLIPS HWY
City-St-Zip: JACKSONVILLE, FL 32207

Title: D () Delete
Name: LUKENBACH, STEVE
Address: 4344 PHILLIPS HWY
City-St-Zip: JACKSONVILLE, FL 32207

Title: D () Delete
Name: COLLACK, RANDY
Address: 4344 PHILLIPS HWY
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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.

SIGNATURE: CHRISTIAN FLOWERS

D

04/06/2005

Electronic Signature of Signing Officer or Director

Date