2006 FOR PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # P00000096231 1. Entity Name LIBERTY EXPRESS, INC.

Principal Place of Business

3328 BOTTLEBRUSH CT KISSIMMEE, FL 34746

Mailing Address

3328 BOTTLEBRUSH CT KISSIMMEE, FL 34746

FILED Jan 30, 2006 08:00 AM **Secretary of State**



DO NOT WRITE IN THIS SPACE

01072006 No Chg-P CR2E034 (11/05)

4.	FEI Number 59-3676086		<u>-</u>	Applied For Not Applicable	
5.	Certificate of Status Desired	×	\$8.75 Fee Reg	Additional uired	

6. Name and Address of Current Registered Agent

PARKER, WAYNE W 3328 BOTTLEBRUSH CT KISSIMMEE, FL 34746

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	named entity submits this statement for the pons of registered agent.	urpose of changing its registered	office or re	gistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title	I applicable. DNOTE. Registered A	gent signature r	equired when reinstaling)	DATE
FILI After Ma	E NOW!!! FEE 18 \$150.00 ny 1, 2008 Fee will be \$550.00	Election Campaign Financi Trust Fund Contribution.	ing 🗆	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS		······································	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PARKER, WAYNE W 3328 BOTTLEBRUSH CT KISSIMMEE, FL 34746				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PARKER, MARLENE D 3328 BOTTLEBRUSH CT KISSIMMEE, FL 34746				000000406995 02/07/06-80112-016 158.75
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TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby o	ertify that the information supplied with this fi	ling does not qualify for the exem	notions conf	tained in Chapter 119	3, 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 it made under oath, that it 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: JAVALE IN SIGNATURE SIGNATURE AND TYPED OR PRINCED NAME OF SIGNANG OFFICER OR DIRECTOR	J. PARKER	1-16-06	407-933-0948
SIGNATURE AND TYPED OR PRINCED HAME OF SIGNING OFFICER OR DIRECTOR		Date	Daytime Phone #