

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000103264

Entity Name: STCB TRUCKING, INC.

FILED  
Jan 04, 2008  
Secretary of State

## Current Principal Place of Business:

P.O. BOX 567  
ROSELAND, FL 32957

## New Principal Place of Business:

802 TAMARIND CIRCLE  
BAREFOOT BAY, FL 32976

## Current Mailing Address:

P.O. BOX 567  
ROSELAND, FL 32957

## New Mailing Address:

FEI Number: 59-3685211      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SANDERS, MICHAEL C  
802 TAMARIND CIRCLE  
BAREFOOT BAY, FL 32976      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: SANDERS, MICHAEL C  
Address: P.O. BOX 567  
City-St-Zip: ROSELAND, FL 32957

Title: D ( ) Delete  
Name: SANDERS, CHRISTINE R  
Address: P.O. BOX 567  
City-St-Zip: ROSELAND, FL 32957

Title: D ( ) Delete  
Name: SANDERS, RICHARD P  
Address: 920 SPRUCE ST  
City-St-Zip: BAREFOOT BAY, FL 32976

Title: D ( ) Delete  
Name: SANDERS, PATRICIA A  
Address: 920 SPRUCE ST  
City-St-Zip: BAREFOOT BAY, FL 32976

## 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 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: MICHAEL C SANDERS

PRES

01/04/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date