2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P01000001757

Entity Name: A & F NORRIS TRANSPORTATION COMPANY, INC.

FILED May 29, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

717 NW 6TH AVE. OCALA, FL 34475

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 1371 OCALA, FL 34478

FEI Number: 59-3605156 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DAWSON, GWENDOLYN B WILLIAMS, VICKY
10300 N.W. 125TH ST. 25 REDWOOD TRACE
REDDICK, FL 32686 US OCALA, FL 34472 US

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: VICKY WILLIAMS 05/29/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVPS () Delete Title: P (X) Change () Addition Name: NORRIS, ALBERT E NORRIS, ALBERT E

 Name:
 NORRIS, ALBERT E
 Name:
 NORRIS, ALBERT E

 Address:
 717 NW 6TH AVE.
 Address:
 717 NW 6TH AVE.

 City-St-Zip:
 OCALA, FL 34475
 City-St-Zip:
 OCALA, FL 34475

Title: TD () Delete Title: V (X) Change () Addition Name: NORRIS, ALBERT E Name: HENRY, VICTORIA M

 Name:
 NORRIS, ALBERT E
 Name:
 HENRY, VICTORIA

 Address:
 717 NW 6TH AVE.
 Address:
 717 NW 6TH AVE.

 City-St-Zip:
 OCALA, FL 34475
 City-St-Zip:
 OCALA, FL 34475

Title: () Delete Title: S () Change (X) Addition

 Name:
 Name:
 FRANKLIN, DEBRA J

 Address:
 Address:
 717 NW 6TH AVE

 City-St-Zip:
 City-St-Zip:
 OCALA, FL 34475

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 NORRIS, DERRICK

 Address:
 Address:
 717 NW 6TH AVE

 City-St-Zip:
 City-St-Zip:
 OCALA, FL 34475

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: ALBERT E. NORRIS P 05/29/2007