

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000016053

Entity Name: NEW ROAD EQUIPMENT, INC.

FILED  
Apr 28, 2005  
Secretary of State

## Current Principal Place of Business:

14156 24TH CT. NORTH  
LOXAHATCHEE, FL 33470

## New Principal Place of Business:

## Current Mailing Address:

14156 24TH CT. NORTH  
LOXAHATCHEE, FL 33470

## New Mailing Address:

P.O. BOX 194  
LOXAHATCHEE, FL 33470

FEI Number: 05-0531222

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MILSTEAD, JASON A  
14156 24TH COURT NORTH  
LOXAHATCHEE, FL 33470 US

## Name and Address of New Registered Agent:

MILSTEAD, MANDY  
P.O. BOX 194  
LOXAHATCHEE, FL 33470 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: MANDY MILSTEAD

04/28/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MILSTEAD, JASON  
Address: 14156 24TH CT. NORTH  
City-St-Zip: LOXAHATCHEE, FL 33470

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: MILSTEAD, MANDY  
Address: P.O. BOX 194  
City-St-Zip: LOXAHATCHEE, FL 33470

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: MANDY MILSTEAD

D

04/28/2005

Electronic Signature of Signing Officer or Director

Date