


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 12, 2008 8:00 am
Secretary of State

08-12-2008 90025 046 ***550.00

DOCUMENT # P01000049299	
1. Entity Name D.M. FREIGHT SERVICES, INC.	

Principal Place of Business 313 CANTEBURY DRIVE STATE COLLEGE, PA 16803	Mailing Address CANTERBURY 313 CANTEBURY DRIVE STATE COLLEGE, PA 16803
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07062008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3715710	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent MOFIELD, DAVID 205 AVE. K WINTER HAVEN, FL 33880

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$550.00 Due by September 12, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MOFIELD, DAVID E 313 CANTEBURY DRIVE STATE COLLEGE, PA 16803
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  David Mofield 8/4/08 814-861-5004
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #