


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 02, 2005 08:00 AM
Secretary of State

DOCUMENT # P01000086198 1. Entity Name BAXTER'S TRUCKING INC.	
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Principal Place of Business 4680 NW 8TH DR PLANTATION, FL 33317-1427	Mailing Address 4680 NW 8TH DR PLANTATION, FL 33317-1427
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DO NOT WRITE IN THIS SPACE



01302005 No Chg-P CR2E034 (10/03)

4. FEI Number **65-1132477** Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent
**BAXTER, RUPERT G
4680 NW 8TH DR
PLANTATION, FL 33317**

**DO NOT WRITE
IN THIS SPACE**

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  **PRESIDENT** **01-30-05**
(NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000210748 02/02/05-80093-004 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BAXTER, RUPERT G 4680 NW 8TH DR PLANTATION, FL 33317
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CAMPBELL, LAURICE M 4680 NW 8TH DR PLANTATION, FL 33317
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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:  **01-30-05** **954-544-3576**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #