

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000104274

Entity Name: U.S. CONVEYOR SOLUTIONS, INC.

FILED
Mar 06, 2009
Secretary of State

Current Principal Place of Business:

4660 LAKE INDUSTRIAL BLVD
TAVARES, FL 32778

New Principal Place of Business:

Current Mailing Address:

4660 LAKE INDUSTRIAL BLVD
TAVARES, FL 32778

New Mailing Address:

FEI Number: 01-0561298

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHUMACHER, LAWRENCE W
335 SHOREWOOD DRIVE
TAVARES, FL 32778 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: PSTD () Delete
Name: SCHUMACHER, LAWRENCE W
Address: 335 SHOREWOOD DRIVE
City-St-Zip: TAVARES, FL 32778 US

Title: VD () Delete
Name: GASHAW, HURLEY V
Address: P.O. BOX 824
City-St-Zip: SORRENTO, FL 32778 US

Title: VD () Delete
Name: ROBERTS, KEITH A
Address: 18441 CAYMAN STREET
City-St-Zip: EUSTIS, FL 32736 US

Title: VD () Delete
Name: GRIFFIN, HENRY D
Address: 4371 ABACO DR.
City-St-Zip: TAVARES, FL 32778 US

Title: D () Delete
Name: JESKE, BRENDA L
Address: 27805 LOIS DRIVE
City-St-Zip: TAVARES, FL 32778 US

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:

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: LAWRENCE W. SCHUMACHER

PSTD

03/06/2009

Electronic Signature of Signing Officer or Director

Date