

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

DOCUMENT # P01000112617

1. Entity Name  
RON BRANNEN TRUCKING, INC.



Principal Place of Business  
24786 NORTHWEST 22ND AVENUE  
LAWTEY, FL 32058

Mailing Address  
POST OFFICE BOX 696  
LAWTEY, FL 32058

**FILED**

05 MAR 11 PM 4:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



02072005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-3757980

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145

**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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (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. ☐

\$5.00 May Be  
Added to Fees

500048829945  
03/22/05--01007--008 \*\*150.00

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME PD  
BRANNEN, RON  
STREET ADDRESS 24786 NORTHWEST 22ND AVENUE  
CITY-ST-ZIP LAWTEY, FL 32058

TITLE  
NAME VD  
ELLIOTT, BRUCE R  
STREET ADDRESS 24786 NORTHWEST 22ND AVENUE  
CITY-ST-ZIP LAWTEY, FL 32058

TITLE  
NAME STD  
BRANNEN, CECELIA  
STREET ADDRESS 24786 NORTHWEST 22ND AVENUE  
CITY-ST-ZIP LAWTEY, FL 32058

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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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: Ronald K. Brannen Pres. 3-4-05 904-591-1450  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #