

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 26, 2004 8:00 am
Secretary of State

07-26-2004 90009 034 ***150.00

DOCUMENT # P02000036984

1. Entity Name
C & N HAULING, INC.



Principal Place of Business
**4897 WARD BASIN RD
MILTON, FL 32570**

Mailing Address
**4897 WARD BASIN RD
MILTON, FL 32570**

44049867



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07142004

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

68-0497620

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FARRINGTON, PRESTON O
4897 WARD BASIN RD
MILTON, FL 32570**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
FARRINGTON, PRESTON O
4897 WARD BASIN RD
MILTON, FL 32583** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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: *Preston Farrington*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-22-04 850-516-4796

Date

Daytime Phone #

Attachment

44049867

#B2000036984

C & N Hauling, Inc.

4897 Ward Basin Road

Milton, FL 32570

Phone (850) 981-1612

July 20, 2004

Division of Corporations

P.O. Box 6198

Tallahassee, FL 32314

To Whom it May Concern:

I recently realized that I have not filed my annual report. I do not recall receiving a notice to file from the Florida Department of State as I always have. I am requesting the penalty be waived on my renewal because I did not receive a notice to file. I have enclosed a \$150 check payable to Florida Department of State to renew my corporation. If you have any questions, please contact me at (850) 981-1612. Thank you for your time and assistance.

Sincerely,



Preston O. Farrington

President