

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Sep 06, 2007 8:00 am
Secretary of State

09-06-2007 90011 033 ***550.00

DOCUMENT # P02000133316

1. Entity Name
MELVIN'S HAULING, INC.



Principal Place of Business

P.O. BOX 887 440 Springhill Rd.
PERRY, FL 32348

Mailing Address

P.O. BOX 887
PERRY, FL 32348

DO NOT WRITE IN THIS SPACE



07032007 No Chg-P CR2E034 (11/05)

4. FEI Number
52-2390905

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

BOWDEN, MELVIN M JR.
440 SPRINGHILL RD. 203 S. Hendry Ave.
PERRY, FL 32347

**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 \$550.00
Due by September 14, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PD
BOWDEN, MELVIN M JR.
203 S. HENDRY AVE.
PERRY, FL 32347

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VSTD
BOWDEN, JOEY E
203 S. HENDRY AVE.
PERRY, FL 32347

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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CITY - ST - ZIP

TITLE
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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 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:

Joey E. Bowden
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joey E. Bowden

8/24/07
Date

838-2517
Daytime Phone #

DOCUMENT # F02000133310

1. Entity Name

MELVIN'S HAULING, INC.



Principal Place of Business

P.O. BOX 887
PERRY, FL 32348

Mailing Address

P.O. BOX 887
PERRY, FL 32348

ATTACHMENT

40131518

05102007

No Chg-P

CR2E034 (11/05)

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DATE

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Due by September 14, 20079. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	BOWDEN, MELVIN M JR.
STREET ADDRESS	203 S. HENDRY AVE.
CITY-ST-ZIP	PERRY, FL 32347

TITLE	VSTD
NAME	BOWDEN, JOEY E
STREET ADDRESS	203 S. HENDRY AVE.
CITY-ST-ZIP	PERRY, FL 32347

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5-3-2007