

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000009164

FILED
Apr 30, 2008
Secretary of State

Entity Name: IWT TESORO TRANSPORT, INC.

Current Principal Place of Business:

3500 SW 42ND AVE.
PALM CITY, FL 34990

New Principal Place of Business:

Current Mailing Address:

191 POST RD W
STE. 10
WESTPORT, CT 06880

New Mailing Address:

3500 SW 42ND AVE.
PALM CITY, FL 34990

FEI Number: 74-3079768

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLEMAN, GAYLE
2101 NW BOCA RATON BLVD STE 1
BOCA RATON, FL 33431 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: DPCE () Delete
Name: BOUCHER, JR, HENRY J
Address: 191 POST RD. WEST, STE. 10
City-St-Zip: WESTPORT, CT 06880

Title: VP () Delete
Name: BOUCHER, PAUL
Address: 3500 SW 42ND AVE.
City-St-Zip: PALM CITY, FL 34990

Title: VP () Delete
Name: JORDAN, FORREST
Address: 3500 SW 42ND AVE.
City-St-Zip: PALM CITY, FL 34990

Title: VP (X) Delete
Name: SPENCER, KATHRYN
Address: 3500 SW 42ND AVE.
City-St-Zip: PALM CITY, FL 34990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: BOUCHER, PAUL F
Address: 3500 SW 42ND AVE
City-St-Zip: PALM CITY, FL 34990

Title: CFO (X) Change () Addition
Name: RENZE, ANN MARIE
Address: 3500 SW 42ND AVE
City-St-Zip: PALM CITY, FL 34990

Title: VP (X) Change () Addition
Name: SPENCER, KATHRYN
Address: 3500 SW 42ND AVE.
City-St-Zip: PALM CITY, FL 34990

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: ANN MARIE RENZE

CFO

04/30/2008

Electronic Signature of Signing Officer or Director

_____ Date