

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000063362

FILED  
Jan 25, 2009  
Secretary of State

Entity Name: ADVANCED VAN & TRUCK EQUIPMENT, INC.

## Current Principal Place of Business:

4154 INCUBATOR COURT  
SANFORD, FL 32771

## New Principal Place of Business:

## Current Mailing Address:

4154 INCUBATOR COURT  
SANFORD, FL 32771

## New Mailing Address:

FEI Number: 55-0835392      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BROOKS, ARTHUR A  
3160 S.E. GRAN PARKWAY  
STUART, FL 34997 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: PTD ( ) Delete  
Name: BROOKS, ARTHUR A  
Address: 3160 S.E. GRAN PARKWAY  
City-St-Zip: STUART, FL 34997

Title: VD ( ) Delete  
Name: BROOKS, MARLENE J  
Address: 3160 S. E. GRAN PKWY.  
City-St-Zip: STUART, FL 34997

Title: D ( ) Delete  
Name: DUCOMB, JEFFERY C  
Address: 30153 BRISTOL LANE  
City-St-Zip: BINGHAM FARMS, MI 48025

Title: VD ( ) Delete  
Name: HARREL, DOUGLAS E  
Address: 4154 INCUBATOR CT.  
City-St-Zip: SANFORD, FL 32771

Title: SD ( ) Delete  
Name: HARRIS, JOLYNN A  
Address: 4154 INCUBATOR CT.  
City-St-Zip: SANFORD, FL 32771

## 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: ARTHUR A. BROOKS

P

01/25/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date