


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 17, 2005 8:00 am
Secretary of State

05-17-2005 90011 020 ***150.00

DOCUMENT # P03000079989 1. Entity Name MARSHALL PALMER TRUCKING, INC.	
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Principal Place of Business RT 3, BOX 154 LAKE BUTLER, FL 32054	Mailing Address RT 3, BOX 154 LAKE BUTLER, FL 32054
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DO NOT WRITE IN THIS SPACE



03062005 No Chg-P CR2E034 (10/03)

4. FEI Number 20-0103664	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent NETTIE DAVIS, INC 846 S.W. MAIN BLVD LAKE CITY, FL 32025	DO NOT WRITE IN THIS SPACE
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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. **4**

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P PALMER, MARSHALL SR RT 3, BOX 154 LAKE BUTLER, FL 32054
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SEC PALMER, OMIE RT 3, BOX 154 LAKE BUTLER, FL 32054
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
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: Marshall Palmer Jr. **5-1-05** **386-954-1225**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone