

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000082905

Entity Name: L & S TRANSPORTATION CORP., INC.

FILED
Sep 14, 2005
Secretary of State

Current Principal Place of Business:

2092 59 WAY NORTH
CLEARWATER, FL 33760

New Principal Place of Business:

Current Mailing Address:

PO BOX 18158
CLEARWATER, FL 337628158

New Mailing Address:

FEI Number: 16-1677841

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOFLIN, C. WAYNE JR.
2092 59 WAY NORTH
CLEARWATER, FL 33760 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LOFLIN, C. WAYNE JR
Address: PO BOX 18158
City-St-Zip: CLEARWATER, FL 33762

Title: D () Delete
Name: LOFLIN, SYLVIA
Address: PO BOX 18158
City-St-Zip: CLEARWATER, FL 33762

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 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: C WAYNE LOFLIN JR

PRES

09/14/2005

Electronic Signature of Signing Officer or Director

Date