


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 31, 2005 8:00 am
Secretary of State

01-31-2005 90071 037 ***150.00

DOCUMENT # P03000088529

1. Entity Name
DIWAY TRANSPORTATION, INC.



Principal Place of Business 222 RABBIT TRACK ROAD SATSUMA, FL 32189 US	Mailing Address P.O. BOX 1238 SAN MATEO, FL 32189 US
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10000000



01242005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0138157	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FARNSWORTH, DONALD W
222 RABBIT TRACK ROAD
SATSUMA, FL 32189

**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 _____ (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	PRES FARNSWORTH, DONALD W P.O. BOX 1238 SAN MATEO, FL 32187
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS FARNSWORTH, DIANA S 222 RABBIT TRACK ROAD SATSUMA, FL 32189
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GARON, CINDY L 6 SUNBIRCH DRIVE JEANNETTE, PA 15644
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME 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 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: *Donald W. Farnsworth* *DIANA S. FARNSWORTH* 1/25/05 386-649-4371
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #