

**2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Sep 18, 2008  
Secretary of State**

DOCUMENT# P03000098240

Entity Name: FOURWAY TRUCKING & SOD INSTALLATION, INC.

**Current Principal Place of Business:**

251 DEER HUNTER RD  
BUNNELL, FL 32110 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O RAYNA WAY  
P O BOX 86  
BUNNELL, FL 32110

**New Mailing Address:**

FEI Number: 20-0310386      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WAY, RAYNA C  
251 DEER HUNTER RD.  
BUNNELL, FL 32110 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

**OFFICERS AND DIRECTORS:**

Title: PS ( ) Delete  
Name: WAY, HARVEY L  
Address: 251 DEER HUNTER RD.  
City-St-Zip: BUNNELL, FL 32110 US

Title: VP ( ) Delete  
Name: WAY, RAYNA C  
Address: 251 DEER HUNTER RD.  
City-St-Zip: BUNNELL, FL 32110 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: WAY, JR., HARVEY L  
Address: 251 DEER HUNTER RD.  
City-St-Zip: BUNNELL, FL 32110 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T ( ) Change (X) Addition  
Name: WAY, HARVEY L  
Address: 2919 HICKORY STREET  
City-St-Zip: BUNNELL,, FL 32110

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: RAYNA C. WAY

VP

09/18/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date