

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000105542

Entity Name: L. S. & D. TRUCKING CORP.

FILED
May 18, 2005
Secretary of State

Current Principal Place of Business:

2 PECAN RUN TERR
OCALA, FL 344726041

New Principal Place of Business:

Current Mailing Address:

2 PECAN RUN TERR
OCALA, FL 344726041

New Mailing Address:

FEI Number: 20-0260826

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ATKINS, LEROY W
2 PECAN RUN TERR
OCALA, FL 344726041 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: PT () Delete
Name: ATKINS, LEROY W
Address: 2 PECAN RUN TERR
City-St-Zip: OCALA, FL 344726041

Title: S () Delete
Name: CAMPBELL, SAMANTHA N
Address: 2 PECAN RUN TERR
City-St-Zip: OCALA, FL 344726041

Title: D () Delete
Name: BENDAIVIS, DONNA M
Address: 2 PECAN RUN TERR
City-St-Zip: OCALA, FL 344726041

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: ATKINS, LEROY W
Address: 2 PECAN RUN TERR
City-St-Zip: OCALA, FL 344726041

Title: SD (X) Change () Addition
Name: CAMPBELL, SAMANTHA N
Address: 2 PECAN RUN TERR
City-St-Zip: OCALA, FL 344726041

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: LEROY W. ATKINS

PTD

05/18/2005

Electronic Signature of Signing Officer or Director

Date