


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 30, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000106009 1. Entity Name PEN-ROO TRUCKING, INC.	
--	---

Principal Place of Business 6615 TAILFEATHER WAY BRADENTON, FL 34203	Mailing Address 999 CATTLEMEN RD SUITE F SARASOTA, FL 34232
--	--

DO NOT WRITE IN THIS SPACE



06152006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-1804990	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

LEVITT, SANDY
2201 RINGLING BOULEVARD
SUITE 203
SARASOTA, FL 34237

**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)
Signature, typed or printed name of registered agent and title if applicable. 000000567803
06/30/06-00005-004 150.00
DATE

FILE NOW!!! FEE IS \$550.00 Due by September 6, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	--

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STAHNKE, ELMER R 6615 TAILFEATHER WAY BRADENTON, FL 34203
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STAHNKE, PENELOPE D 6615 TAILFEATHER WAY BRADENTON, FL 34203
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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 exemptions contained 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 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:  6/27/06 941-342-8984
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #