

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000147091

FILED  
Jun 27, 2007  
Secretary of State

Entity Name: TURNER & TAYLOR TRUCKING, INC

## Current Principal Place of Business:

4806 SANFORD CT.  
TAMPA, FL 33617 US

## New Principal Place of Business:

## Current Mailing Address:

4806 SANFORD CT.  
APT G  
TAMPA, FL 33617 US

## New Mailing Address:

FEI Number: 20-0467480      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TAYLOR, HODGES  
506 W PLAZA PL  
TAMPA, FL 33602 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: P ( ) Delete  
Name: TURNER, ALPHONSO  
Address: 4806 SANFORD CT APT G  
City-St-Zip: TAMPA, FL 33617 US

Title: VP ( ) Delete  
Name: TAYLOR, HODGES  
Address: 506 W PLAZA PL  
City-St-Zip: TAMPA, FL 33602 US

Title: S ( ) Delete  
Name: YOUNG, MAXIE  
Address: 4806 SANFORD CT APT G  
City-St-Zip: TAMPA, FL 33617 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: ALPHONSO TURNER

PRES

06/27/2007

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

\_\_\_\_\_  
Date