

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000148922

FILED  
Jun 21, 2007  
Secretary of State

Entity Name: D'FAITHFUL TRANSPORTATION, INC.

## Current Principal Place of Business:

181 OXFORD ROAD  
SUITE 121  
CASSELEBERRY, FL 32730

## New Principal Place of Business:

467 LAKE HOWELL ROAD  
SUITE 103  
MAITLAND, FL 32751

## Current Mailing Address:

181 OXFORD ROAD  
SUITE 121  
CASSELEBERRY, FL 32730

## New Mailing Address:

467 LAKE HOWELL ROAD  
SUITE 103  
MAITLAND, FL 32751

FEI Number: 90-0131257

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DIXON, VONYA  
181 OXFORD ROAD  
SUITE 121  
CASSELEBERRY, FL 32730 US

## Name and Address of New Registered Agent:

DIXON, WALTER  
467 LAKE HOWELL ROAD  
SUITE 103  
MAITLAND, FL 32751 US

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: WALTER DIXON

06/21/2007

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: PD ( ) Delete  
Name: DIXON, VONYA F  
Address: 135 N LAKEWOOD CIRCLE  
City-St-Zip: MAITLAND, FL 32751

Title: VPD ( ) Delete  
Name: DIXON, WALTER  
Address: 135 N. LAKEWOOD CIRCLE  
City-St-Zip: MAITLAND, FL 32751

Title: S ( ) Delete  
Name: THOMAS, JAMES JR  
Address: 181 OXFORD ROAD  
City-St-Zip: CASSELEBERRY, FL 32730

Title: D ( ) Delete  
Name: THOMAS, BETTY J  
Address: 181 OXFORD ROAD  
City-St-Zip: CASSELEBERRY, FL 32730

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change ( ) Addition  
Name: THOMAS, JAMES JR  
Address: 467 LAKE HOWELL ROAD  
City-St-Zip: MAITLAND, FL 32751

Title: D (X) Change ( ) Addition  
Name: THOMAS, BETTY J  
Address: 467 LAKE HOWELL ROAD  
City-St-Zip: MAITLAND, FL 32751

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: WALTER DIXON

VP

06/21/2007

Electronic Signature of Signing Officer or Director

Date