2005 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P04000003649

1. Entity Name
D & L TRANSPORT, INC.

Principal Place of Business

1244 W PATTERSON STREET
LAKELAND, FL 33815

Mailing Address

1244 W PATTERSON STREET
LAKELAND, FL 33815

07072005   No Chg-P   CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number	Applied For
74-3111812	Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

HARGROVE, GINGER
1244 W PATTERSON STREET
LAKELAND, FL 33815

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 _Ginger Hargrove_   _Ginger Hargrove_   7-7-05

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10.	OFFICERS AND DIRECTORS
TITLE	DP
NAME	HARGROVE, DANNY E
STREET ADDRESS	1244 W. PATTERSON ST.
CITY-ST-ZIP	LAKELAND, FL 33815
TITLE	D
NAME	HARGROVE, GINGER
STREET ADDRESS	1244 W. PATTERSON ST.
CITY-ST-ZIP	LAKELAND, FL 33815
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 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 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: X _Ginger Hargrove_ _Ginger Hargrove_ 7-7-05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date

863-581 2181