

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000025359

FILED
Jan 26, 2006
Secretary of State

Entity Name: RICK'S HAULING & TRACTOR SERVICE, INC.

Current Principal Place of Business:

18507 BARTON DRIVE
LUTZ, FL 33549

New Principal Place of Business:

Current Mailing Address:

18507 BARTON DRIVE
LUTZ, FL 33549

New Mailing Address:

FEI Number: 20-0767639

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COFFIN, KIMBERLY G
18507 BARTON DRIVE
LUTZ, FL 33549 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: COFFIN, KIMBERLY G
Address: 18507 BARTON DRIVE
City-St-Zip: LUTZ, FL 33549

Title: STD () Delete
Name: COFFIN, RICHARD P
Address: 18507 BARTON DRIVE
City-St-Zip: LUTZ, FL 33549

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: COFFIN, RICHARD P
Address: 18507 BARTON DRIVE
City-St-Zip: LUTZ, FL 33549

Title: VPTD (X) Change () Addition
Name: COFFIN, KIMBERLY G
Address: 18507 BARTON DRIVE
City-St-Zip: LUTZ, FL 33549

Title: S () Change (X) Addition
Name: DUBOSE, SANDRA P
Address: 18507 BARTON DRIVE
City-St-Zip: LUTZ, FL 33549

I hereby certify that the information supplied with this filing does not qualify for the 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: KIMBERLY G COFFIN

VPTD

01/26/2006

Electronic Signature of Signing Officer or Director

Date