

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000026094

Entity Name: AO LOGISTICS INC.

FILED  
Jan 08, 2008  
Secretary of State

## Current Principal Place of Business:

329 CENTRAL AVENUE  
SARASOTA, FL 34236

## New Principal Place of Business:

1613-2 FRUITVILLE RD  
SARASOTA, FL 342368525 US

## Current Mailing Address:

329 CENTRAL AVENUE  
SARASOTA, FL 34236

## New Mailing Address:

1613-2 FRUITVILLE RD  
SARASOTA, FL 342368525 US

FEI Number: 90-0150143

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BALDWIN, WALTER S D  
329 CENTRAL AVENUE  
SUITE 101  
SARASOTA, FL 34236 US

## Name and Address of New Registered Agent:

BALDWIN, WALTER S D  
1613-2 FRUITVILLE RD  
SARASOTA, FL 342368525 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 S BALDWIN

01/08/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: BALDWIN, WALTER  
Address: 329 CENTRAL AVENUE  
City-St-Zip: SARASOTA, FL 34236

Title: P ( ) Delete  
Name: MILLER, RICHARD  
Address: 5627 FISHERMAN'S DRIVE  
City-St-Zip: BRADENTON, FL 34209

Title: S ( ) Delete  
Name: STERLACE, SCOTT  
Address: 4521 AMANDA AVENUE  
City-St-Zip: NORTH PORT, FL 34286

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: BALDWIN, WALTER S  
Address: 1613-2 FRUITVILLE RD  
City-St-Zip: SARASOTA, FL 342368525 US

Title: P (X) Change ( ) Addition  
Name: MILLER, RICHARD  
Address: 5627 FISHERMAN'S DRIVE  
City-St-Zip: BRADENTON, FL 34209 US

Title: S (X) Change ( ) Addition  
Name: STERLACE, SCOTT  
Address: 3549 WORTHINGTON AVENUE  
City-St-Zip: NORTH PORT, FL 34286 US

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 S BALDWIN

D

01/08/2008

Electronic Signature of Signing Officer or Director

Date