

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000026777

FILED
May 01, 2008
Secretary of State

Entity Name: TRUE VISION LOGISTICS, INC.

Current Principal Place of Business:

8022 MACINNES DR. E
JACKSONVILLE, FL 32244 US

New Principal Place of Business:

8022 MACINNES DR.
JACKSONVILLE, FL 32244 US

Current Mailing Address:

8022 MACINNES DR. E
JACKSONVILLE, FL 32244 US

New Mailing Address:

8022 MACINNES DR.
JACKSONVILLE, FL 32244 US

FEI Number: 86-1095759

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANE, ANTIONETTE R
8022 MACINNES DR. E
JACKSONVILLE, FL 32244 US

Name and Address of New Registered Agent:

LANE, ANTIONETTE R
8022 MACINNES DR.
JACKSONVILLE, FL 32244 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:

05/01/2008

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: LANE, JEFFERY E
Address: 8022 MACINNES DR. E
City-St-Zip: JACKSONVILLE, FL 32244 US

Title: VP () Delete
Name: LANE, ANTIONETTE R
Address: 8022 MACINNES DR. E
City-St-Zip: JACKSONVILLE, FL 32244 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LANE, ANTIONETTE R
Address: 8022 MACINNES DR.
City-St-Zip: JACKSONVILLE, FL 32244 US

Title: VP (X) Change () Addition
Name: BOWMAN, KENDRA A
Address: 8022 MACINNES DR.
City-St-Zip: JACKSONVILLE, FL 32244 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: ANTIONETTE R. LANE

P

05/01/2008

Electronic Signature of Signing Officer or Director

Date