## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with

SIGNATURE:

an address, with all other like empowered.

ME OF SIGNING OFFICER OR BERECTOR

Daytime Phone #

Date

## **FILED DOCUMENT # P04000037166** Feb 28, 2007 08:00 AM 1. Entity Name **Secretary of State** DAN'S TRANSPORT INC. Mailing Address Principal Place of Business 875 EUCHEE CHAPEL ROAD 875 EUCHEE CHAPEL ROAD SPRING CITY, TN 37381 SPRING CITY, TN 37381 01042007 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0822302 Not Applicable \$8.75 Additional 5. Certificate of Status Desired $\Box$ 6. Name and Address of Current Registered Agent HEBEL, DANIEL DO NOT WRITE 5310 BOWLING GREEN DR. FT. PIERCE, FL 34951 IN THIS SPACE 3. 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\_\_\_\_\_Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when roinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME HEBEL, DANIEL J 875 EUCHEE CHAPEL DRIVE STREET ADDRESS SPRING CITY, TN 37381 CITY-ST-ZIP U00000650552 03/08/07-80018-008 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under cath; 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 in