2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000039595

City-St-Zip:

DT

Title:

Name:

Address:

City-St-Zip:

FILED Apr 30, 2006 Secretary of State

Entity Name: PORT RICHEY HAULERS, INC. **Current Principal Place of Business: New Principal Place of Business:** 7135 CUTTY SARK DRIVE PORT RICHEY, FL 34668 **Current Mailing Address: New Mailing Address:** P.O. BOX 25 NEW PORT RICHEY, FL 34656 US FEI Number: 90-0138508 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PIET VAN BEMDEN 7135 CUTTY SARK DRIVE PORT RICHEY, FL 34668 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: DS () Delete Title: (X) Change () Addition ULREICH, WAYNE J Name: Name: RUBLE, STEVEN R 6927 AZLEE AVENUE 1235 BROOKEVIEW DR Address: Address: City-St-Zip: NEW PORT RICHEY, FL 34655 City-St-Zip: ODESSA, FL 34656 Title: DVP Title: DΡ () Delete (X) Change () Addition Name: WEBB. JIMMY D Name: WEBB, JIMMY D 3310 JAMESTOWN DRIVE 3310 JAMESTOWN DRIVE Address: Address: HOLIDAY, FL 34691 HOLIDAY, FL 34691 City-St-Zip: City-St-Zip: () Delete Title: (X) Change () Addition Title: DP DVP FISHER, PHILIP E BEESON, CHAD Name: Name: 6427 OELSNER 5037 LARCH LN Address: Address:

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.

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

NEW PORT RICHEY, FL 34653

() Change () Addition

SIGNATURE: PIET VAN BEMDEN DT 04/30/2006

NEW PORT RICHEY, FL FLORIDA US

() Delete

7426 TANGLEWOOD DRIVE

NEW PORT RICHEY, FL 34654

PIET VAN BEMDEN,