

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000120840

FILED  
Aug 25, 2005  
Secretary of State

**Entity Name:** THRE C'S TRANSPORTATION & DELIVERY SERVICE, INC.

**Current Principal Place of Business:**

P.O. BOX 290402  
TAMPA, FL 33687 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 290402  
TAMPA, FL 33687 US

**New Mailing Address:**

**FEI Number:** 20-1090603

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CARSWELL, ALVIN  
4205 DOWNING AVE  
TAMPA, FL 33603 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

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: CARSWELL, ALVIN  
Address: 4205 DOWNING AVE.  
City-St-Zip: TAMPA, FL 33603 US

Title: VP ( ) Delete  
Name: CARSWELL, CURTIS  
Address: 3625 E. IDLEWILD AVE.  
City-St-Zip: TAMPA, FL 33610

Title: SEC ( ) Delete  
Name: CARSWELL, SHARON  
Address: 4205 DOWNING AVE.  
City-St-Zip: TAMPA, FL 33603

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ALVIN CARSWELL

CEO

08/25/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date