

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000129322

FILED  
Apr 15, 2007  
Secretary of State

Entity Name: NATIONAL LOGISTICS & DISTRIBUTION, INC.

## Current Principal Place of Business:

189 PINWOOD LANE  
WINTER HAVEN, FL 338819117 US

## New Principal Place of Business:

189 PINWOOD LANE  
LAKE ALFRED, FL 33850 US

## Current Mailing Address:

189 PINWOOD LANE  
WINTER HAVEN, FL 338819117 US

## New Mailing Address:

189 PINWOOD LANE  
LAKE ALFRED, FL 33850 US

FEI Number: 20-1610315

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WEATHERFORD, WILLIAM P JR  
1150 LOUISIANA AVENUE  
SUITE 4  
WINTER PARK, FL 327893738 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P/T ( ) Delete  
Name: KRIEG, BENJAMIN  
Address: 189 PINWOOD LANE  
City-St-Zip: WINTER HAVEN, FL 338819117 US

Title: V/S ( ) Delete  
Name: KRIEG, NADINE  
Address: 189 PINWOOD LANE  
City-St-Zip: WINTER HAVEN, FL 338819117 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/T (X) Change ( ) Addition  
Name: KRIEG, BENJAMIN  
Address: 189 PINWOOD LANE  
City-St-Zip: LAKE ALFRED, FL 33850 US

Title: V/S (X) Change ( ) Addition  
Name: KRIEG, NADINE  
Address: 189 PINWOOD LANE  
City-St-Zip: LAKE ALFRED, FL 33850 US

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.

SIGNATURE: BENJAMIN KRIEG

P

04/15/2007

Electronic Signature of Signing Officer or Director

Date