## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000132110

Entity Name: COUNTRYSIDE XPRESS, INC.

FILED Apr 17, 2006 Secretary of State

Current Principal Place of Business: New Principal Place	of Business:
--	--------------

1486 BUCKEYE LN 1609 FIELDFARE CT PALM HARBOR, FL 34683 DUNEDIN, FL 34698

Current Mailing Address: New Mailing Address:

1486 BUCKEYE LN 1609 FIELDFARE CT PALM HARBOR, FL 34683 DUNEDIN, FL 34698

FEI Number: 75-3177616 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:

COSTELLO, MARLENE

1486 BUCKEYE LN

PALM HARBOR, FL 34683 US

COSTELLO, MARLENE
1609 FIELDFARE CT
DUNEDIN, FL 34698 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: MARLENE COSTELLO 04/17/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition Name: COSTELLO, MARLENE Name: COSTELLO, MARLENE

 Address:
 1486 BUCKEYE LN
 Address:
 1609 FIELDFARE CT

 City-St-Zip:
 PALM HARBOR, FL 34683
 City-St-Zip:
 DUNEDIN, FL 34698

Title: V () Delete Title: V (X) Change () Addition

 Name:
 COSTELLO, GERALD
 Name:
 COSTELLO, GERALD

 Address:
 1486 BUCKEYE LN
 Address:
 1609 FIELDFARE CT

 City-St-Zip:
 PALM HARBOR, FL 34683
 City-St-Zip:
 DUNEDIN, FL 34698

Title: ST () Delete Title: ST (X) Change () Addition

 Name:
 BURTON, JONATHAN
 Name:
 BURTON, JONATHAN

 Address:
 2266 GULF TO BAY #765
 Address:
 1609 FIELDFARE CT

 City-St-Zip:
 CLEARWATER, FL 33765
 City-St-Zip:
 DUNEDIN, FL 34698

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: MARLENE COSTELLO P 04/17/2006