2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000146111

Name:

Address:

City-St-Zip:

FULTZ, MARGARETH E

4705 LA FORCE STREET

ZEPHYRHILLS, FL 33542

FILED Sep 06, 2005 Secretary of State

Entity Nan	ne: NRC TF	RUCKING SERVICE, INC.				
Current Principal Place of Business:				New Principal Place of Business:		
4552 1/2 G/ ZEPHYRHI	ALL BLVD LLS, FL 335	3390006				
Current Mailing Address:				New Mailing Address:		
4552 1/2 GALL BLVD ZEPHYRHILLS, FL 335390006				P.O. BOX 6 ZEPHYRHILLS, FL 335390006		
FEI Number: 20-1801169 FEI Number Applied For () FEI Nu			mber Not Applicable () Certificate of Status Desired ()			
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
4705 LÁ FC	RGARETH DRCE STRE LLS, FL 335	ET				
The above in the State	named entity of Florida.	submits this statement for the	purpose o	f changing it	s registere	ed office or registered agent, or both,
SIGNATUR	!E:					
Electronic Signature of Registered Agent				Date		
Election Carr	paign Financi	ng Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				${\bf ADDITIONS/CHANGES\ TO\ OFFICERS\ AND\ DIRECTORS:}$		
Title: Name: Address: City-St-Zip:	NOEL, HENR P.O. BOX 6) Delete Y M S, FL 335390006		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	VD (HALL, TEESA 37808 BOSTO ZEPHYRHILL	ON AVE.		Title: Name: Address: City-St-Zip:	VD HALL, TER 37808 BOS ZEPHYRHI	
Title:	SD () Delete		Title:	V/ST	(X) Change () Addition

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.

Name:

Address:

City-St-Zip:

FULTZ, MARGARETH E

4705 LA FORCE STREET

ZEPHYRHILLS, FL 33542

SIGNATURE: MARGARETH E. FULTZ VP 09/06/2005