

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000156196

Entity Name: TOMMY'S HAULING, INC.

FILED  
Feb 16, 2012  
Secretary of State

**Current Principal Place of Business:**

1190 SOUTH MAIN STREET  
WILDWOOD, FL 34785

**New Principal Place of Business:**

**Current Mailing Address:**

1190 SOUTH MAIN STREET  
WILDWOOD, FL 34785

**New Mailing Address:**

FEI Number: 20-2024836

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GOUGH, JAMES T  
1190 SOUTH MAIN STREET  
WILDWOOD, FL 34785 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: REDDING, ROBERT W  
Address: 1190 SOUTH MAIN STREET  
City-St-Zip: WILDWOOD, FL 34785

Title: VD  
Name: REDDING, JULIE A  
Address: 1190 SOUTH MAIN STREET  
City-St-Zip: WILDWOOD, FL 34785

Title: STD  
Name: REDDING, ROBERT W  
Address: 1190 SOUTH MAIN STREET  
City-St-Zip: WILDWOOD, FL 34785

I hereby 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 all other like empowered.

SIGNATURE: JAMES T GOUGH

AGEN

02/16/2012

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

\_\_\_\_\_ Date