

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000158870

Entity Name: K L LOGISTICS, INC.

FILED
Feb 11, 2006
Secretary of State

Current Principal Place of Business:

2856 SADLER ROAD
STE. C
FERNANDINA BEACH, FL 32034

New Principal Place of Business:

Current Mailing Address:

PO BOX 15732
FERNANDINA BEACH, FL 32035

New Mailing Address:

FEI Number: 20-1871779

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLAIR, THOMAS A
54025 JEANNIE ROAD
CALLAHAN, FL 320111670 US

Name and Address of New Registered Agent:

SCOTT, KARLA S
85785 BLACKMON ROAD
YULEE, FL FL 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: KARLA SCOTT

02/11/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: SCOTT, KARLA S
Address: 85785 BLACKMON ROAD
City-St-Zip: YULEE, FL 320974749

Title: TD () Delete
Name: MOORE, LATRECIA A
Address: 2858 MANTANZAS AVENUE
City-St-Zip: FERNANDINA BEACH, FL 320344396

Title: SD (X) Delete
Name: BLAIR, THOMAS A
Address: P.O. BOX 1670
City-St-Zip: CALLAHAN, FL 320111670

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: SCOTT, KARLA S
Address: 85785 BLACKMON ROAD
City-St-Zip: YULEE, FL 320974749

Title: TD (X) Change () Addition
Name: MOORE, LATRECIA A
Address: PO BOX 31516
City-St-Zip: BLACKSHEAR, GA 31516

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 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: KARLA SCOTT

VP

02/11/2006

Electronic Signature of Signing Officer or Director

Date