2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000027603

Entity Name: K.H. & SON TRUCKING INC.

FILED Jul 08, 2008 Secretary of State

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

332 NEEDLES COURT LONGWOOD, FL 32779

Current Mailing Address: New Mailing Address:

332 NEEDLES COURT 1584 TODD TOWN RD LONGWOOD, FL 32779 SPARTA, TN 38583

FEI Number: 20-2478687 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:

HOLLINGSWORTH, KENT M PRES 332 NEEDLES CT.
LONGWOOD, FL 32779 US HOLLINGWORTH, KENT M PRES 332 NEEDLES CT.
LONGWOOD, FL 32779 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: KENT M HOLLINGWORTH 07/08/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 HOLLINGWORTH, KENT M
 Name:
 HOLLINGWORTH, KENT M PRES

 Address:
 332 NEEDLES COURT
 Address:
 332 NEEDLES COURT

Address: 332 NEEDLES COURT Address: 332 NEEDLES COURT
City-St-Zip: LONGWOOD, FL 32779 City-St-Zip: LONGWOOD, FL 32779

I hereby certify that the information supplied with this filing does not qualify 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: KENT M HOLLINGWORTH PRES 07/08/2008

Electronic Signature of Signing Officer or Director

Date