

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000060246

FILED
Apr 03, 2009
Secretary of State

Entity Name: HOFFMANN TRANSPORTATION, INC.

Current Principal Place of Business:

4453 45TH ST
ST PETERSBURG, FL 33711

New Principal Place of Business:

Current Mailing Address:

4453 45TH ST
ST PETERSBURG, FL 33711

New Mailing Address:

FEI Number: 14-1928020

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOFFMANN, PAUL C STD
4453 45TH ST. S
SAINT PETERSBURG, FL, FL 33711 US

Name and Address of New Registered Agent:

HOFFMANN, PAUL C STD
4453 45TH ST. S
SAINT PETERSBURG, FL 33711 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: ALAN BOHMS

04/03/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: STD () Delete
Name: HOFFMANN, PAUL
Address: 4453 45TH ST
City-St-Zip: ST PETERSBURG, FL 33711

Title: PD () Delete
Name: HOFFMANN, STEPHANIE
Address: 4453 45TH ST
City-St-Zip: ST PETERSBURG, FL 33711

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ALAN BOHMS

RA

04/03/2009

Electronic Signature of Signing Officer or Director

Date