2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P05000119719

OAKMONT TRUCKING, INC.



FILED Apr 05, 2007 08:00 All Secretary of State

Principal Place of Business

5353 OAKMONT VILLAGE CIR. LAKE WORTH, FL 33463

Mailing Address

5353 OAKMONT VILLAGE CIR. LAKE WORTH, FL 33463



DO NOT WRITE IN THIS SPACE

No Chg-P CR2E034 (11/05) 03312007 Applied For 4. FEI Number 20-3340419 Not Applicable \$8.75 Additional

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

PETERFORD, SCOTT 5353 OAKMONT VILLAGE CIR. LAKE WORTH, FL 33463

DO NOT WRITE IN THIS SPACE

		1.			·
	named entity submits this statement for the prions of registered agent.	urpose of changing its registered	office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title if	applicable. (NOTE, Registered A	gent signatur	e required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.			`g 🗆	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS		· · · · · · · · · · · · · · · · · · ·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PETERFORD, SCOTT 5353 OAKMONT VILLAGE CIR. LAKE WORTH, FL 33463				U00000690211
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PETERFORD, LISA 5353 OAKMONT VILLAGE CIR. LAKE WORTH, FL 33463				04/11/07-80066-024 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·				
TITLE					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if

NAME STREET ADDRESS CITY-ST-ZIP

Lisa Peterford V 3/31/07 561 965-75