


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Aug 23, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P05000165291</b> 1. Entity Name <b>ROUSE PIGOTT TRUCKING INC.</b>																	
Principal Place of Business <b>P.O. BOX 177 CRAWFORDVILLE FL 32326</b>			Mailing Address <b>P.O. BOX 177 CRAWFORDVILLE FL 32326</b>														
2. Principal Place of Business - No P.O. Box #		3. Mailing Address															
Suite, Apt. #, etc.		Suite, Apt. #, etc.															
City & State		City & State		4. FEI Number <b>20-3892820</b> <div style="float: right;"> <input type="checkbox"/> Applied For  <input type="checkbox"/> Not Applicable         </div>													
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>													
6. Name and Address of Current Registered Agent  <b>PIGOTT, DEWEY R. 4432 CRAWFORDVILLE HIGHWAY CRAWFORDVILLE FL 32327</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;"><b>FL</b> Zip Code</span>													
8. 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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE _____ (NOTE: Registered Agent signature required when reinsuring) Signature, typed or printed name of registered agent and title if applicable _____ DATE _____																	
<b>FILE NOW!!! FEE IS \$550.00 DUE BY September 5, 2007 Make Check Payable to Florida Department of State</b>			S 607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. <input checked="" type="checkbox"/>														
9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 40%;">NAME</td> <td style="width: 30%;">Delete <input type="checkbox"/></td> </tr> <tr> <td>NAME</td> <td><b>PIGOTT, DEWEY R.</b></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td><b>P.O. BOX 177</b></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td><b>CRAWFORDVILLE FL 32326</b></td> <td></td> </tr> </table>			TITLE	NAME	Delete <input type="checkbox"/>	NAME	<b>PIGOTT, DEWEY R.</b>		STREET ADDRESS	<b>P.O. BOX 177</b>		CITY - ST - ZIP	<b>CRAWFORDVILLE FL 32326</b>	
TITLE	NAME	Delete <input type="checkbox"/>															
NAME	<b>PIGOTT, DEWEY R.</b>																
STREET ADDRESS	<b>P.O. BOX 177</b>																
CITY - ST - ZIP	<b>CRAWFORDVILLE FL 32326</b>																
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 40%;">NAME</td> <td style="width: 30%;">Delete <input type="checkbox"/></td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> </table>			TITLE	NAME	Delete <input type="checkbox"/>	NAME			STREET ADDRESS			CITY - ST - ZIP			U000000772588 08/23/07-80001-003 150.00		
TITLE	NAME	Delete <input type="checkbox"/>															
NAME																	
STREET ADDRESS																	
CITY - ST - ZIP																	