

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000167977

FILED  
Apr 20, 2009  
Secretary of State

**Entity Name:** MAYS TRUCKING OF S.W. FLORIDA, INC.

**Current Principal Place of Business:**

15155 COLDING ROAD  
FELDA, FL 33930

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 5241  
IMMOKALEE, FL 34143

**New Mailing Address:**

**FEI Number:** 55-0911650

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

MAYS, SUSAN C  
15155 COLDING ROAD  
FELDA, FL 33930 US

**Name and Address of New Registered Agent:**

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:**

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: MAYS, DANIEL P  
Address: PO BOX 5372  
City-St-Zip: IMMOKALEE, FL 34143

Title: ST ( ) Delete  
Name: COLDING-MAYS, SUSAN  
Address: P.O. BOX 5372  
City-St-Zip: IMMOKALEE, FL 34143

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: VP ( ) Change (X) Addition  
Name: MAYS, JEFFERY S  
Address: PO BOX 5241  
City-St-Zip: IMMOKALEE, FL 34143

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:** DANIEL P. MAYS

PD

04/20/2009

Electronic Signature of Signing Officer or Director

Date