2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000001795

Entity Name: LACOOCHEE TRUCKING INC.

DADE CITY, FL 33523

City-St-Zip:

FILED Mar 21, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
19948 BOWER RD. DADE CITY, FL 33523			38303 10TH AVE ZEPHYRHILLS, FL 33	38303 10TH AVE ZEPHYRHILLS, FL 33542	
Current Mailing Address:			New Mailing Address	New Mailing Address:	
19948 BOWER RD. DADE CITY, FL 33523			38303 10TH AVE ZEPHYRHILLS, FL 33542		
FEI Number	: 20-4036906	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	l Address of C	urrent Registered Agent:	Name and Address of	f New Registered Agent:	
FUGATE, 19948 BO' DADE CIT		US			
	named entity s e of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUI	RE:				
	Electron	ic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P () FUGATE, CASH 19948 BOWER DADE CITY, FL	RD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () HAMMETT, SAN 36910 TERESA DADE CITY, FL	RD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () FUGATE, CASH 19831 BOWER DADE CITY, FL	RD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	T () FUGATE, CASH 19831 BOWER		Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

SIGNATURE: CASH FUGATE P 03/21/2007