2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000085041

IANNOTTI, JAMES

CAPE CORAL, FL 33904

3602 SE 1ST PL

Name:

Address:

City-St-Zip:

Entity Name: SHORE TO SHORE FREIGHTLINES, INC.

FILED Jun 19, 2009 Secretary of State

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Current Principal Place of Business:			New Principal Place of B	New Principal Place of Business:	
6835 INTERNATIONAL CENTER BLVD # 2 FORT MYERS, FL 33912 US			2744 EDISON AVE UNIT 1, WAREHOUSE 5 FORT MYERS, FL 33916	US	
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
6835 INTERNATIONAL CENTER BLVD, # 2 FORT MYERS, FL 33912 US			PO BOX 1667 FORT MYERS, FL 33902	US	
FEI Number	: 20-5087877	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
CAPE COI	TH TERRACE RAL, FL 33990 named entity s		ourpose of changing its registered offi	ce or registered agent, or both,	
in the State	e of Florida.				
SIGNATU					
		ic Signature of Registered Age		Date	
		3(2)(b), F.S., the corporation did no	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES T	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P () PENNER, ZENE 1007 SE 5TH TI CAPE CORAL,	ERRACE	Title: () C Name: Address: City-St-Zip:	change () Addition	
Title: Name: Address: City-St-Zip:	VP () PENNER, RICK 1007 SE 5TH TI CAPE CORAL,	ERRACE	Title: () C Name: Address: City-St-Zip:	hange()Addition	
Title: Name: Address: City-St-Zip:	D () COVENTRY, PA 2247 SE 26TH S CAPE CORAL,	ST	Title: () C Name: Address: City-St-Zip:	change () Addition	
Title: Name: Address: City-St-Zip:	D (X) BAILEY, JOSHU 1129 SW 45TH CAPE CORAL,	ST	Title: () C Name: Address: City-St-Zip:	change () Addition	
Title [.]	D (X)	Delete	Title: () C	hange () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: RICKY PENNER VP 06/19/2009