

2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P07000102375

FILED
Nov 02, 2010
Secretary of State

Entity Name: THRU-WAY FLEET CARE INC.

Current Principal Place of Business:

450 NORTH WAY
SANFORD, FL 32773 US

New Principal Place of Business:

1160 E 30TH. STREET
BLDG 409
SANFORD, FL 32773 US

Current Mailing Address:

450 NORTH WAY
SANFORD, FL 32773 US

New Mailing Address:

1160 E 30TH. STREET
BLDG 409
SANFORD, FL 32773 US

FEI Number: 26-1869198

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAKS BLVD
SUITE A-100
TAMPA, FL 336123425 US

Name and Address of New Registered Agent:

SALMON, WILLIAM A
1160 E. 30TH STREET
BLDG 409
SANFORD, FL 32773 US

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: WILLIAM A. SALMON

11/02/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: SALMON, WILLIAM A
Address: 32218 CHIPOLA TRAIL
City-St-Zip: SORRENTO, FL 32776 US

Title: CEO
Name: SALMON, WILLIAM A
Address: 32218 CHIPOLA TRAIL
City-St-Zip: SORRENTO, FL 32776 US

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM A. SALMON

PRES

11/02/2010

Electronic Signature of Signing Officer or Director

Date