

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000002749

FILED  
Sep 25, 2009  
Secretary of State

**Entity Name:** OLYMPIAN TRUCK RENTAL AND LEASING, INC.

**Current Principal Place of Business:**

1123 CROWN PARK CIRCLE  
WINTER GARDEN, FL 34787

**New Principal Place of Business:**

**Current Mailing Address:**

1123 CROWN PARK CIRCLE  
WINTER GARDEN, FL 34787

**New Mailing Address:**

**FEI Number:** 26-1728302

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FISCHER, JAMES  
127 W FAIRBANKS AVE. #283  
WINTER PARK, FL 32789 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: FISCHER, JAMES  
Address: 127 W FAIRBANKS AVE. #283  
City-St-Zip: WINTER PARK, FL 32789

Title: T ( ) Delete  
Name: FISCHER, ELAINA  
Address: 127 W FAIRBANKS AVE. #283  
City-St-Zip: WINTER PARK, FL 32789

Title: VCFO ( ) Delete  
Name: YEATER, DIANE  
Address: 127 W FAIRBANKS AVE. #283  
City-St-Zip: WINTER PARK, FL 32789

Title: CEO ( ) Delete  
Name: ROUNTREE, SYLVIA  
Address: 10041 CLARCONA OCOEE ROAD  
City-St-Zip: APOPKA, FL 32703

Title: CP ( ) Delete  
Name: STEPHENS, JAMES  
Address: 127 W, FAIRBANKS AVE. #283  
City-St-Zip: WINTER PARK, FL 32789

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

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

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

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

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

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

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:** JAMES C STEPHENS

PRES

09/25/2009

Electronic Signature of Signing Officer or Director

Date