

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000019132

Entity Name: TRUCKITSMART, INC.

**FILED**  
**Apr 11, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

711 EAST MAIN STREET  
SUITE 5  
HAINES CITY, FL 33844

**New Principal Place of Business:**

109 NORTH 9TH STREET  
HAINES CITY, FL 33844

**Current Mailing Address:**

711 EAST MAIN STREET  
SUITE 5  
HAINES CITY, FL 33844

**New Mailing Address:**

109 NORTH 9TH STREET  
HAINES CITY, FL 33844

FEI Number: 27-2203431

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

SHAUGHNESSY, NICK  
711 EAST MAIN ST,STE 5  
HAINES CITY, FL 33844 US

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

SHAUGHNESSY, NICK  
109 NORTH 9TH STREET  
HAINES CITY, FL 33844 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:

Electronic Signature of Registered Agent

04/11/2011

Date

**OFFICERS AND DIRECTORS:**

Title: PTD  
Name: SHAUGHNESSY, NICK  
Address: 1111 PENINSULAR DRIVE  
City-St-Zip: HAINES CITY, FL 33844

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: NICHOLAS B SHAUGHNESSY

PRES

04/11/2011

Electronic Signature of Signing Officer or Director

Date