

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 16, 2004 8:00 am**  
**Secretary of State**

03-16-2004 90043 028 \*\*\*150.00

**DOCUMENT # P09187**

1. Entity Name

TRUCKERS EXPRESS, INC.



Principal Place of Business

P. O. BOX 4267  
MISSOULA MT 59806

Mailing Address

P. O. BOX 4267  
MISSOULA MT 59806

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number  
**81-0412388**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2004 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete  
NAME FROELICH, ROBERT W  
STREET ADDRESS 3501 W BROADWAY  
CITY-ST-ZIP MISSOULA MT 59808

TITLE President ☒ Change ☐ Addition  
NAME Brian J. Smith  
STREET ADDRESS 3501 West Broadway  
CITY-ST-ZIP Missoula, MT 59808

TITLE STD ☐ Delete  
NAME SPETTIGUE, DALE E  
STREET ADDRESS 3501 W BROADWAY  
CITY-ST-ZIP MISSOULA MT 59808

TITLE Vice President ☒ Change ☐ Addition  
NAME Brian Hallas  
STREET ADDRESS 3501 West Broadway  
CITY-ST-ZIP Missoula, MT 59808

TITLE VD ☐ Delete  
NAME SMITH, BRIAN J  
STREET ADDRESS 3501 W BROADWAY  
CITY-ST-ZIP MISSOULA MT 59808

TITLE Secretary/Treasurer ☒ Change ☐ Addition  
NAME Tara Scott  
STREET ADDRESS 3501 West Broadway  
CITY-ST-ZIP Missoula, MT 59808

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Brian J. Smith **Brian J. Smith, President 3/10/04 (406) 721-6002**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #