

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000052557

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** CLOCK WORK TRANSPORTATION INC

**Current Principal Place of Business:**

858 SW ST TROPEZ COURT  
PORT ST LUCIE, FL 34986

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 880291  
PORT ST LUCIE, FL 34988

**New Mailing Address:**

PO BOX 280047  
QUEENS VILLAGE, NY 11428

**FEI Number:** 45-2390096

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TAYLOR, WAYNE D  
4610 NW 44TH STREET  
TAMARAC, FL 33319 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: TAYLOR, WAYNE D  
Address: 858 SW ST TROPEZ COURT  
City-St-Zip: PORT ST LUCIE, FL 34986

Title: VP  
Name: TAYLOR, CAROL P  
Address: 858 SW ST TROPEZ COURT  
City-St-Zip: PORT ST LUCIE, FL 34986

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: CAROL TAYLOR

VP

04/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date