


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 08:00 A
Secretary of State

DOCUMENT # P93000078367	
1. Entity Name SINGLETARY TRUCKING & HAULING COMPANY, INC.	

Principal Place of Business 1461 NW CR 250 MAYO, FL 32066	Mailing Address 1461 NW CR 250 MAYO, FL 32066
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DO NOT WRITE IN THIS SPACE



01082007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3204851	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent COLLINS, STEVE 325 S. OHIO AVE. LIVE OAK, FL 32060	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when reappointing) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SINGLETARY, JAMMIE LAVON 1461 NW CR 250 MAYO, FL 32066
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SINGLETARY, JASON L 2428 NORTHWEST COUNTY ROAD 536 MAYO, FL 32066
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST SINGLETARY, ELIZABETH A 1461 NORTHWEST COUNTY ROAD 250 MAYO, FL 32066
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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05/02/07 80016-025 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>Elizabeth A. Singletary</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	<u>04/19/07</u> Date	<u>386-294-1168</u> Daytime Phone #
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