

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000083586

FILED
Apr 20, 2009
Secretary of State

Entity Name: CALOOSA HARVESTING AND HAULING, INC.

Current Principal Place of Business:

15400 OAKLAND AVE.
WINTER GARDEN, FL 34787

New Principal Place of Business:

15400 OAKLAND AVE.
WINTER GARDEN, FL 34787 US

Current Mailing Address:

P O BOX 979
OAKLAND, FL 347600979

New Mailing Address:

P O BOX 979
OAKLAND, FL 347600979 US

FEI Number: 59-3219204

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOYD, MAURICE M
15400 OAKLAND AVE.
WINTER GARDEN, FL 34787 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BOYD, MAURICE M
Address: 15400 OAKLAND AVE.
City-St-Zip: WINTER GARDEN, FL

Title: VD () Delete
Name: WILLIS, TIMMY D
Address: 2105 CHURCH RD.
City-St-Zip: FELDA, FL 33930

Title: STP () Delete
Name: GRETCHEN BOYD
Address: 15400 OAKLAND AVE
City-St-Zip: WINTER GARDEN, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BOYD, MAURICE M
Address: 15400 OAKLAND AVE.
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: VD (X) Change () Addition
Name: WILLIS, TIMMY D
Address: 2105 CHURCH RD.
City-St-Zip: FELDA, FL 33930 US

Title: STP (X) Change () Addition
Name: GRETCHEN BOYD
Address: 15400 OAKLAND AVE
City-St-Zip: WINTER GARDEN, FL 34787 US

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: MAURICE M. BOYD

PD

04/20/2009

Electronic Signature of Signing Officer or Director

Date