

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000003690

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** REVELL SPREADER SERVICE, INC.

**Current Principal Place of Business:**

2641 MANUEL ROAD  
BOWLING GREEN, FL 33834

**New Principal Place of Business:**

**Current Mailing Address:**

2641 MANUEL ROAD  
BOWLING GREEN, FL 33834

**New Mailing Address:**

**FEI Number:** 65-0457373

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

REVELL, GERALD  
2641 MANUEL RD  
BOWLING GREEN, FL 33834 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: DPT  
Name: REVELL, GERALD  
Address: 2641 MANUEL ROAD  
City-St-Zip: BOWLING GREEN, FL 33834 US

Title: S  
Name: REVELL, JAMIE  
Address: 2641 MANUEL RD  
City-St-Zip: BOWLING GREEN, FL 33834 US

Title: VP  
Name: REVELL, JARED  
Address: 2641 MANUEL RD  
City-St-Zip: BOWLING GREEN, FL 33834 US

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: GERALD REVELL

DPT

04/29/2011

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

\_\_\_\_\_  
Date