## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000002341

City-St-Zip: MIDDLEBURG, FL 32068

Entity Name: GARLAND TRANSPORT, INC

FILED Mar 13, 2005 Secretary of State

Entity Nai	me: GARLAI	ND TRANSPORT, INC.				
Current P	rincipal Plac	e of Business:	New Princ	New Principal Place of Business:		
	ETBRIER BRA WILLE, FL 32					
Current Mailing Address:			New Maili	New Mailing Address:		
	ETBRIER BRA IVILLE, FL 32					
FEI Number	: 59-3352851	FEI Number Applied For ( )	FEI Number Not Appl	icable ( )	Certificate of Status Desired ( )	
Name and	l Address of	Current Registered Agent:	Name and	Address of	f New Registered Agent:	
<b>312 SWEE</b>	), CHARLES . ETBRIER BRA IVILLE, FL 32	ANCH LN.				
	named entity of Florida.	submits this statement for th	e purpose of changing i	ts registered	d office or registered agent, or both	
SIGNATU	RE:					
		nic Signature of Registered /	Agent		Date	
Election Car	mpaign Financi	ng Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	GARLAND, C	RIER BRANCH LN.	Title: Name: Address: City-St-Zip:		()Change ()Addition	
Title: Name: Address: City-St-Zip:	GARLAND, LE 312 SWEETB	) Delete :SLIE B RIER BRANCH LN. LE, FL 32259	Title: Name: Address: City-St-Zip:		()Change ()Addition	
Title: Name: Address: City-St-Zip:	S ( MULLINS, WI 5627 BRYNEI JACKSONVIL	R DRIVE	Title: Name: Address: City-St-Zip:	GARLAND, L 312 SWEET	(X) Change()Addition ESLIE B BRIER BRANCH LANE LLE, FL 32259	
Title: Name: Address:	T ( JOHNS, LERO 171 N MIMOS		Title: Name: Address:	GARLAND, C	(X) Change ()Addition HARLES A II BRIER BRANCH LANE	

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

City-St-Zip: JACKSONVILLE, FL 32259

SIGNATURE: LESLIE B. GARLAND V/S 03/13/2005