

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P97000039390

FILED
Feb 27, 2009
Secretary of State**Entity Name:** COAST TO COAST TRUCK & TRAILER SALES, INC.**Current Principal Place of Business:**4250 W SILVER SPRINGS BLVD
OCALA, FL 34482**New Principal Place of Business:****Current Mailing Address:**4250 W SILVER SPRINGS BLVD
OCALA, FL 34482**New Mailing Address:****FEI Number:** 65-0782980**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**WILLIAM D. SOMAN, P.A.
11191 SW 60 AVE.
PINECREST, FL 33156 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:** VD () Delete
Name: SCOTT, SUSAN
Address: 10624 N.W. 225-A
City-St-Zip: OCALA, FL 34482**Title:** PD () Delete
Name: WILKERSON, NANCY
Address: 3255 NW 79 AVE.
City-St-Zip: OCALA, FL 34482**Title:** VD () Delete
Name: SOMAN, WILLIAM D
Address: 11191 SW 60 AVE.
City-St-Zip: PINECREST, FL 33156**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** DST (X) Change () Addition
Name: SCOTT, SUSAN
Address: 10624 N.W. 225-A
City-St-Zip: OCALA, FL 34482**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

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: SUSAN SCOTT

ST

02/27/2009

Electronic Signature of Signing Officer or Director_____
Date