2005 FOR PROFIT CORPORATION

Feb 24, 2005 08:00 AM **ANNUAL REPORT Secretary of State** DOCUMENT # P97000075255 POELKER TRANSPORTATION SERVICES, INC. Principal Place of Business Mailing Address 15610MCGREGOR BOULEVARD 15610MCGREGOR BOULEVARD FORT MYERS, FL 33908 FORT MYERS, FL 33908 02222005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0782532 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DALLAS, EDWARD A DO NOT WRITE 17274 SAN CARLOS BOULEVARD, #202 FORT MYERS BEACH, FL 33931 IN THIS SPACE 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, typed or printed name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 \$5.00 May Be 1100000241595 Trust Fund Contribution. Added to Fees 02/24/05-80044-008 158.75 OFFICERS AND DIRECTORS 10. HILE MANSUR, JUDITH NAME 15110 BAIN ROAD STREET ADDRESS FORT MYERS, FL 33908 CITY-ST-ZIP TITLE POELKER, ROBERT T NAME STREET ADDRESS 11704 POINTE CIRCLE FORT MYERS, FL 33908 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE DILE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filling does not qualify 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 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

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

FILED