

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000010672

Entity Name: RIPPLINGER TRANSPORT, INC.

FILED
Jul 05, 2005
Secretary of State

Current Principal Place of Business:

214 LM GAINES BLVD
STARKE, FL 32091

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 86
STARKE, FL 32091

New Mailing Address:

FEI Number: 59-3493585

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIPPLINGER, ED
2386 N.E. 203RD ST.
STARKE, FL 32091 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: P () Delete
Name: RIPPLINGER, ED
Address: 2386 NE 203 RD ST
City-St-Zip: LAWTEY, FL 32058

Title: VP () Delete
Name: RIPPLINGER, JULIA W
Address: 2382 NE 203RD ST
City-St-Zip: LAWTEY, FL 32058

Title: S () Delete
Name: RIPPLINGER, MICHEAL W
Address: PO BOX 831
City-St-Zip: LAKE BUTLER, FL 32054

Title: T () Delete
Name: RIPPLINGER, JOHN G
Address: 2386 NE 203RD ST
City-St-Zip: LAWTEY, FL 32058

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: RIPPLINGER, MICHAEL W
Address: PO BOX 831
City-St-Zip: LAKE BUTLER, FL 32054

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: ED RIPPLINGER

P

07/05/2005

Electronic Signature of Signing Officer or Director

Date