


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 27, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P98000045156</b> <small>1. Entity Name</small> OCEANSIDE TRUCK & TRAILER, INC.	
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<small>Principal Place of Business</small> 1650 CYPRESS DRIVE JUPITER, FL 33458	<small>Mailing Address</small> 1650 CYPRESS DRIVE JUPITER, FL 33458
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**DO NOT WRITE IN THIS SPACE**



03202006 No Chg-P CR2E034 (11/06)

<small>4. FEI Number</small> 65-0838630	<small>Applied For</small> Not Applicable
<small>5. Certificate of Status Desired</small> <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

**6. Name and Address of Current Registered Agent**

MANLEY, CHRISTOPHER  
1004 HAWIE STREET  
JUPITER, FL 33458

**DO NOT WRITE 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** \_\_\_\_\_ 3. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) **DATE** \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> After May 1, 2006 Fee will be \$350.00	<small>9. Election Campaign Financing Trust Fund Contribution</small> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	U00000481723 04/11/06-80042-024 150.00
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**10. OFFICERS AND DIRECTORS**

<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY - ST - ZIP</small>	D MANLEY, JAMES JR 705 CAYUGA STREET JUPITER, FL 33458
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY - ST - ZIP</small>	D MANLEY, CHRISTOPHER 1004 HAWIE STREET JUPITER, FL 33458
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY - ST - ZIP</small>	
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<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY - ST - ZIP</small>	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 507, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an affidavit, or all other like empowered.

**SIGNATURE:** *Chris Manley* **561-748-3337**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #