## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000084101

Entity Name: CHAMPION TRUCKING, INC.

JACKSONVILLE, FL 32220

City-St-Zip:

FILED Mar 28, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 8796 SNELLGROVE AVENUE NORTH JACKSONVILLE, FL 32220 **Current Mailing Address: New Mailing Address:** 8796 SNELLGROVE AVENUE NORTH JACKSONVILLE, FL 32220 FEI Number: 59-3537204 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LAPP, STEVEN J 8796 SNELL GROVE AVE N US JACKSONVILLE, FL 32220 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition LAPP, STEVEN J Name: Name: 8796 SNELL GROVE AVENUE NORTH Address: Address: City-St-Zip: JACKSONVILLE, FL 32220 City-St-Zip: ( ) Delete Title: STD Title: () Change () Addition LAPP, CYNTHIA J Name: Name: 8796 SNELL GROVE AVENUE NORTH Address: 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: STEVEN J LAPP PD 03/28/2009