

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2008 08:00 AM
Secretary of State

DOCUMENT # P99000005146

1. Entity Name
FITTS TRANSPORT INC.



Principal Place of Business
**10091 HORIZON DR
 SPRING HILL, FL 34608**

Mailing Address
**10091 HORIZON DR
 SPRING HILL, FL 34608**



03282008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3558698** Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**COMPTON, LINDA
 21485 CAMPBELL DR.
 BROOKSVILLE, FL 34601**

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP COMPTON, LINDA 21485 CAMPBELL DR. BROOKSVILLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FITTS, DEAN 10091 HORIZON DR SPRING HILL, FL 34608
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

100000314343
 05/08/08-80072-025 150.00

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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Dean Fitts* **3-28-08** **727-858-0296**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #