

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000014745

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: DOUBLE J TRANSPORT OF LIBERTY COUNTY, INC.

## Current Principal Place of Business:

18730 NE HWY 65 S  
HOSFORD, FL 32334 US

## New Principal Place of Business:

## Current Mailing Address:

6155 SMITH LANE  
SHREVEPORT, LA 71107 US

## New Mailing Address:

FEI Number: 59-3545036      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

COBB, PHILIP  
18730 NE SR 65  
HOSFORD, FL 32334 US

## Name and Address of New Registered Agent:

OGLETREE, TINA  
18730 NE SR 65  
HOSFORD, FL 32334 US

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: TINA OGLETREE

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: COBB, PHILIP  
Address: 118730 NE SR 65  
City-St-Zip: HOSFORD, FL 32334

Title: D ( ) Delete  
Name: COBB, TINA  
Address: 18730 NE SR 65  
City-St-Zip: HOSFORD, FL 32334

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: OGLTREE, TINA  
Address: 118730 NE SR 65  
City-St-Zip: HOSFORD, FL 32334

Title: D (X) Change ( ) Addition  
Name: OGLTREE, TINA  
Address: 18730 NE SR 65  
City-St-Zip: HOSFORD, FL 32334

Title: D ( ) Change (X) Addition  
Name: MILLER, CLIFTON  
Address: 20578 NE HENTZ AVE  
City-St-Zip: BLOUNTSTOWN, FL 32424

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: TINA OGLETREE

S

04/30/2008

Electronic Signature of Signing Officer or Director

Date