

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000018935

FILED
Jan 24, 2004
Secretary of State

Entity Name: ROBERT PADGETT TRUCKING, INC.

Current Principal Place of Business:

1687 NOLAN RD
MIDDLEBURG, FL 32068

New Principal Place of Business:

P. O. BOX 193
MIDDLEBURG, FL 32050 US

Current Mailing Address:

PO BOX 193
MIDDLEBURG, FL 32050

New Mailing Address:

FEI Number: 59-3568787 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PADGETT, ROBERT
1687 NOLAN RD
MIDDLEBURG, FL 32068 US

Name and Address of New Registered Agent:

PADGETT, ROBERT
P. O. BOX 193
MIDDLEBURG, FL 32050 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: ROBERT PADGETT

01/24/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: PADGETT, ROBERT
Address: 1687 NOLAN RD
City-St-Zip: MIDDLEBURG, FL 32068

Title: STVP (X) Delete
Name: MANNING, FAYE
Address: 1687 NOLAN RD
City-St-Zip: MIDDLEBURG, FL 32068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: ROBERT PADGETT

DP

01/24/2004

Electronic Signature of Signing Officer or Director

Date