

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000020194

Entity Name: STANDARD TRUCKING, INC.

FILED
Mar 19, 2006
Secretary of State

Current Principal Place of Business:

1589 N LAKE SHIPP DR SW
WINTER HAVEN, FL 33880

New Principal Place of Business:

Current Mailing Address:

1589 N LAKE SHIPP DR SW
WINTER HAVEN, FL 33880

New Mailing Address:

FEI Number: 65-0908488

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARSENAULT, WENDY L
1589 N LAKE SHIPP DR SW
WINTER HAVEN, FL 33880 US

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: CRAWFORD, MARCELLA E
Address: 1589 N LAKE SHIPP DR
City-St-Zip: WINTER HAVEN, FL 33880

Title: VP () Delete
Name: ARSENAULT, WENDY L
Address: 3813 TIMBER PATH
City-St-Zip: LAKE LAND, FL 33805

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: ARSENAULT, WENDY L
Address: 2007 MISTY MORNING DR
City-St-Zip: WINTER HAVEN, FL 33880

I hereby certify that the information supplied with this filing does not qualify for the 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: MARCIE CRAWFORD

P

03/19/2006

Electronic Signature of Signing Officer or Director

Date