## 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## Apr 19, 2005 08:00 AM Secretary of State DOCUMENT # P99000033299 1. Entity Name B & C TRUCKING & TRAILERS, INC. Principal Place of Business Mailing Address 12650 W. COLONIAL DR. WINTER GARDEN FL 34787 12650 W. COLONIAL DR. WINTER GARDEN FL 34787 2. Principal Place of Business 3. Mailing Address Suite, Apt #, etc. Suite Apt # etc. 1st MOORE CR2E034 (10/04) City & State City & State 4. FEI Number Applied For 59-1024366 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name TYNDALL, GLEN C Street Address (P.O. Box Number is Not Acceptable) 12650 W. COLONIAL DR. WINTER GARDEN FL 34787 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete THE Change Addition NAME TYNDALL, GLEN C STREET ADDRESS 12650 W. COLONIAL DR. STREET ADDRESS WINTER GARDEN FL 34787 CHY-ST-ZIP 011Y-\$1-2IP TITLE Detete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-78P CD17 - S1 - ZIP Change DITE ☐ Delete itti E Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CHY-SI-7P TITLE ☐ Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Addition NAME NAME STREET ADDRESS SIGGET ADDRESS (:[Y-S]-3P CITY-ST-ZIP TITLE ☐ Delete 1070.6 Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CUY-ST ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

Tynd All as Director 4-1-05
HIGH OR DIRECTOR Cale

**FILED**