


2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000034649	
1. Entity Name SHREVE TRUCKING, INC.	

Principal Place of Business 12701 S. HWY 301 BELLEVUE, FL 34421	Mailing Address PO BOX 1086 BELLEVUE, FL 34421
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DO NOT WRITE IN THIS SPACE

FILED
05 OCT 10 PM 1:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



04122005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3572881	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required.	

6. Name and Address of Current Registered Agent

SHREVE, DALE
12701 S. HWY 301
BELLEVUE, FL 34420

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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, 2005 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	PD SHREVE, DALE PO BOX 1086 (12701 S. HWY 301) BELLEVUE, FL 34421
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06/07/04 90004 011 \$150.00

JR 10/11

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: Gerene F. Shreve Date 4-24-05 (352) 245-1225

Dale Shreve Date Shreve 4-24-05 (352) 245-1225



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

September 12, 2005

SHREVE TRUCKING, INC.
PO BOX 1086
BELLEVIEW, FL 34421

SUBJECT: SHREVE TRUCKING, INC.
Ref. Number: P99000034649

We have received your document for SHREVE TRUCKING, INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$550.00.

TO AVOID THE ADMINISTRATIVE DISSOLUTION/REVOCATION, PLEASE RETURN THE CORRECTED REPORT TO THIS OFFICE WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Tina Roberts
Document Specialist

Letter Number: 505A00056168

*My payment of 150⁰⁰ has been a
credit on my acct. for a year.
a double payment was made.
Please check the acct account!*