2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000084876

Entity Name: LAKE CITY LOGISTICS OF JACKSONVILLE. INC

FILED Apr 30, 2007 Secretary of State

Thing Name: Exact of the control of						
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
202 W. MARKET RD., #6 STARKE, FL 32091						
Current Mailing Address:			New Mailii	New Mailing Address:		
202 W MARKET RD. #6 STARKE, FL 32091						
FEI Number: 63-1242687 FEI Number Applied For () FEI Number		Number Not Appli	mber Not Applicable () Certificate of Status Desired ()			
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
LAWRENCE, JIM 20953 NW 55TH AVE. LAWTEY, FL 32058 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:						
Electronic Signature of Registered Agent					Date	
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PT () BROWN, STEVE 103 OLYMPIA D EUFAULA, AL 3	rR.	Title: Name: Address: City-St-Zip:	CEO (X) Change BROWN, STEVE 103 OLYMPIA DR. EUFAULA, AL 36027	() Addition	
Title: Name: Address: City-St-Zip:	V () LAWRENCE, JII 20953 NW 55TH LAWTEY, FL 33	AVE.	Title: Name: Address: City-St-Zip:	PRES (X) Change of LAWRENCE, JIM 20953 NW 55TH AVE. LAWTEY, FL 32058	() Addition	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	VP () Change (LAWRENCE, DEBORAH 20953 NW 55TH AVE. LAWTEY, FL 32058	X) Addition	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	SEC () Change (LAWRENCE, DEBORAH 20953 NW 55TH AVE. LAWTEY, FL 32058	X) Addition	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	TRES () Change (LAWRENCE, JIM 20953 NW 55TH AVE. LAWTEY, FL 32058	(X) Addition	

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: JIM LAWRENCE PRES 04/30/2007