


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 02, 2005 08:00 AM
Secretary of State

DOCUMENT # P99000102053 1. Entity Name HANSON TRUCKING, INC.	
---	---

<i>Principal Place of Business</i> 109 WAMSLEY ROAD JACKSONVILLE, FL 32254	<i>Mailing Address</i> 109 WAMSLEY ROAD JACKSONVILLE, FL 32254
--	--



01062005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0968603	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent

HANSON, CLIFF B
11530 RAMALLAH ROAD
JACKSONVILLE, FL 32219

**DO NOT WRITE
IN THIS SPACE**

6. 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 _____ 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	D HANSON, CLIFF B 11530 RAMALLAH ROAD JACKSONVILLE, FL 32219
TITLE NAME STREET ADDRESS CITY ST ZIP	D HANSON, DIANE 11530 RAMALLAH ROAD JACKSONVILLE, FL 32219
TITLE NAME STREET ADDRESS CITY ST ZIP	D HANSON, MICHAEL 11530 RAMALLAH ROAD JACKSONVILLE, FL 32219
TITLE NAME STREET ADDRESS CITY ST ZIP	
TITLE NAME STREET ADDRESS CITY ST ZIP	
TITLE NAME STREET ADDRESS CITY ST ZIP	

U00000211363
02/02/05-80115-014 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.077(3)(f), 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: J. Diane Hanson 1/30/05 Sec/Treasurer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR