

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S49260

**FILED**  
**Jan 28, 2012**  
**Secretary of State**

**Entity Name:** WARDS TRUCK & EQUIPMENT REPAIR, INC.

**Current Principal Place of Business:**

2730 NE 200 AVE  
WILLISTON, FL 32696 US

**New Principal Place of Business:**

610 SE 6TH AVE  
WILLISTON, FL 32696 US

**Current Mailing Address:**

2730 NE 200 AVE  
WILLISTON, FL 32696 US

**New Mailing Address:**

PO BOX 370  
WILLISTON, FL 32696 US

**FEI Number:** 59-3073310

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WARD, CLAUDIA E  
235 S.W. 8TH AVENUE  
WILLISTON, FL 32696 US

**Name and Address of New Registered Agent:**

WARD, ERIC  
610 SE 6TH AVE  
WILLISTON, FL 32696 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: ERIC WARD

01/28/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VP  
Name: WARD, KENNETH E  
Address: 235 S.W. 8TH AVENUE  
City-St-Zip: WILLISTON, FL

Title: PSTD  
Name: WARD, ERIC  
Address: 610 SE 6TH AVE  
City-St-Zip: WILLISTON, FL

I hereby 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 all other like empowered.

SIGNATURE: ERIC WARD

PSTD

01/28/2012

Electronic Signature of Signing Officer or Director

Date