

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V04021

FILED
Feb 16, 2009
Secretary of State

Entity Name: TRUE LINE CORING & CUTTING OF TAMPA, INC.

Current Principal Place of Business:

6014 W WATERS AVE
TAMPA, FL 336341123 US

New Principal Place of Business:

Current Mailing Address:

120 W 72ND SUITE 200
KANSAS CITY, MO 64114 US

New Mailing Address:

FEI Number: 59-3098370

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NARTKER, THOMAS
6430 NEAL ROAD
FT MYERS, FL 33905 US

Name and Address of New Registered Agent:

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:

Title: VP () Delete
Name: NARTKER, THOMAS A
Address: 6430 NEAL ROAD
City-St-Zip: FORT MYERS, FL 33905

Title: P () Delete
Name: ALEXANDER, JAMES M
Address: 6014 W. WATERS AVE
City-St-Zip: TAMPA, FL 33634

Title: ST () Delete
Name: WILLIAMS, DAVID
Address: 12810 KODIAK AVE
City-St-Zip: HUDSON, FL 34667

Title: VP () Delete
Name: WILLIAMS, DAVID
Address: 12810 KODIAK AVE
City-St-Zip: HUDSON, FL 34667

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: THOMAS A. NARTKER

MR.

02/16/2009

Electronic Signature of Signing Officer or Director

Date