


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jul 17, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P05000065020</b> 1. Entity Name <b>BALLARD TRUCKING, INC.</b>	
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Principal Place of Business <b>7005 BRUSHEY POND RD GRAND RIDGE, FL 32442</b>	Mailing Address <b>7005 BRUSHEY POND RD GRAND RIDGE, FL 32442</b>
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**DO NOT WRITE IN THIS SPACE**



07142007 No Chg-P CR2E034 (11/05)

4. FEI Number <b>20-2776120</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

**6. Name and Address of Current Registered Agent**

**BALLARD, ROBERT  
7005 BRUSHEY POND RD  
GRAND RIDGE, FL 32442**

**DO NOT WRITE  
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 \$550.00  
Due by September 14, 2007**

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	P BALLARD, ROBERT D 7005 BRUSHEY POND RD GRAND RIDGE, FL 32442
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00000769172  
07/17/07-80001-008 558.75

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:** *Robert D Ballard* **7/14/07** Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR