

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Jan 12, 2004 08:00 AM
Secretary of State

DOCUMENT # 312407	
1. Entity Name SMITH'S RANCH & GARDEN, INC.	
Principal Place of Business 117 W. MAGNOLIA STREET ARCADIA, FL 34266 US	Mailing Address 117 W. MAGNOLIA STREET ARCADIA, FL 34266 US



01052004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1170928	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent SMITH, DURWOOD C JR. 117 WEST MAGNOLIA ST ARCADIA, FL 34266
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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: <u>Durwood C. Smith Jr.</u> Signature, typed or printed name of registered agent and fee if applicable	<u>Durwood C. Smith Jr. PTD</u> (NOTE: Registered Agent signature required when reinstating)	<u>1-7-04</u> DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VSD SMITH CINDY, L. 1238 HANSEL RD ARCADIA, FL 34266
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PTD SMITH, D. C. J. 1238 HANSEL RD ARCADIA, FL 34266
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01/13/04-80067-023 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <u>Durwood C. Smith Jr.</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	<u>Durwood C. Smith Jr. PTD</u> Date	<u>1-7-04 863-A4-2142</u> Daytime Phone #