

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 03, 2005 8:00 am**  
**Secretary of State**

05-03-2005 90069 002 \*\*\*150.00

<b>DOCUMENT # 007130</b> 1. Entity Name <b>PEARSON AGRICULTURAL, INC.</b>																													
Principal Place of Business <b>16120 N NEBRASKA AVE</b> <b>LUTZ, FL 33549 US</b>			Mailing Address <b>16120 N NEBRASKA AVE</b> <b>LUTZ, FL 33549 US</b>																										
2. Principal Place of Business <b>1001 Stardust Ln</b> Suite, Apt. #, etc.		3. Mailing Address <b>1001 Stardust Ln</b> Suite, Apt. #, etc.																											
City & State <b>Lutz FL</b>		City & State <b>Lutz FL</b>		4. FEI Number <b>59-0255070</b>																									
Zip <b>33548</b>		Country <b>USA</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>																									
6. Name and Address of Current Registered Agent <b>PEARSON, R.V., JR.</b> <b>16120 N NEBRASKA AVE</b> <b>LUTZ, FL 33549</b>				7. Name and Address of New Registered Agent Name <b>John Pearson</b> Street Address (P.O. Box Number is Not Acceptable) <b>1001 Stardust Ln</b> City <b>Lutz</b> <b>FL</b> Zip Code <b>33548</b>																									
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 <b>John Pearson</b> <i>Pres</i> <b>John Pearson</b> <b>4/28/05</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)</small>																													
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>																										
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">TITLE</td> <td style="width: 60%;">PSTD</td> <td style="width: 20%; text-align: right;"><input checked="" type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>PEARSON, R. V. JR.</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>16120 N. NEBRASKA AVE.</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>LUTZ, FL</td> <td></td> </tr> </table>			TITLE	PSTD	<input checked="" type="checkbox"/> Delete	NAME	PEARSON, R. V. JR.		STREET ADDRESS	16120 N. NEBRASKA AVE.		CITY-ST-ZIP	LUTZ, FL		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">TITLE</td> <td style="width: 60%;">PSTD</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>Pearson John, F</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1001 Stardust Ln</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>Lutz FL 33548</td> <td></td> </tr> </table>			TITLE	PSTD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME	Pearson John, F		STREET ADDRESS	1001 Stardust Ln		CITY-ST-ZIP	Lutz FL 33548	
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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 reports 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: <b>John Pearson</b> <b>4/28/05</b> <b>813-949-6274</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>																													