## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 174070

(3)

SMITH TRACTOR COMPANY INCORPORATED

FILED
Apr 22 1998 8:00am
Secretary of State



•									
Principal Place of Business Mailing Address									
3834 HWY 4		PO BOX 427	PO BOX 427						
PO BOX 427		JAY FL 32565-0427				DO MOT MONTO MUTURA PLANT			
JAY FL 32565 US	U427	US				DO NOT WRITE IN THIS SPACE			
03	_					3. Date Incorporated or Qualified 06/13/1953			
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number		A	pplied For
21		26				59-0784701			ot Applicable
Suite, Apt. :	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional equired
City & State	9	City & State			****	6. Election Campaign Financing		\$5.00	May Be
23		28				Trust Fund Contribution			to Fees
Zip	Country Zip Co			Country 8. This corporation owes or has paid the current year Intangible					
24	25	29	30			Personal Property Tax due Jun			] No
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New R	egistered Ag	ent	
	ITH, W.L. JR.		8	1 1	Name				
	5 MURPHY ROAD		82 Street A			ess (P.O. Box Number is Not Accepta	ıble)		
JAY	' FL 32565		8	3					
			8	4 (	City			<b>65</b> Zip	Code
				$\perp$			FL		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
Signature: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE  PAGE  PAGE									
12.		D DIRECTORS	13.			ADDITIONS/CHANGES TO OFF	CERS AND D	RECTOR	RS IN 12
TITLE	PD	DELETE	1.1 TO LE				L	Change	Addition 3
NAME	<b>SMITH</b> , W L JR		1.2 NAM	E					[3
STREET ADDRESS	<b>54</b> 15 MURPHY ROAD		1.3 STREET ADDRESS		DORESS				
CITY-ST-ZIP	JAY, FLORIDA 00000		1.4 CITY	1.4 CITY - ST - ZIP					
TITLE			2.1 TITLE	2.1 TITLE				Change	Addition
NAME	<b>SM</b> ITH, LOUISE		2.2 NAME		Ì				ļ
STREET ADDRESS	\$415 MURPHY ROAD		2.3 STREET ADDRESS		DRESS				Ì
CITY-ST-ZIP	JAY, FLORIDA 00000		2. 4 CITY - ST - ZIP		ZIP				
TITLE	VD DELETE		3.1 TITLE	3.1 TITLE				Change	Addition
NAME	\$MITH, RICKY WYATT		3.2 NAME						}
STREET ADDRESS	\$415 MURPHY ROAD		3.3 STREET ADDRESS		DDRESS				ļ
CITY-ST-ZIP	JAY, FLORIDA 00000	3.4		'- ST-	ZIP				
TITLE	DELETE 4.1		4.1 711LE	:	1			Change	Addition
NAME			4. 2 NAM	AÉ					
STREET ADDRESS			4.3 STRE	ET AD	DORESS				
CITY-ST-ZIP			4.4 CITY	- ST- Z	ZIP				
TITLE	☐ DELETE 5.1		5.1 TITLE					Change	☐ Addition
NAME	5.2		5.2 NAM	i.2 NAME					
STREET ADDRESS			5.3 STRE	E1 AD	DRESS	•			
CITY-ST-ZIP			5.4 CITY	<u>- \$</u> 1-2	2IP				
TITLE		☐ DELETE	6.1 TITLE					Change	☐ Addition
NAME			6.2 NAM	E		•			ŀ
STREET ADDRESS			6.3 STRE	ET AD	ODRESS	•			
CITY-ST-ZIP	/ X _ \	\	6.4 CITY	- \$1 - 2	ZIP				[
14. Lhereby o	ertify that the informalian supplied y	with this seling does not qualify to				Section 119 07(3)(i) Florida Statutes	Lfurther certif	v that the	information

. Thereby certify that the information supplied with this sting does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual leport 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 of klustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, by on an attachment with an address.

RICKY W. SMITH, VICE PRESIDENT 4-11-98 (850) 675-4505