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Jun 17, 2004 8:00 am
Secretary of State
05-03-2004 91227 019 ***150.00

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2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 253946

1. Entity Name
C & C TRACTOR, INC.

Principal Place of Business	Mailing Address
451 EAST GRAVES AVENUE ORANGE CITY, FL 32763 US	451 EAST GRAVES AVENUE ORANGE CITY, FL 32763 US

66428422

05272004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-0940912

Applied For ☐
Not Applicable ☐

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DEMPSEY, DONALD B
451 EAST GRAVES AVENUE
ORANGE CITY, FL 32763

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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $550.00
Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	MILLARD, RONDA S
STREET ADDRESS	451 EAST GRAVES AVENUE
CITY-ST-ZIP	ORANGE CITY, FL 32763
TITLE	ST
NAME	MILLARD, RONDA S
STREET ADDRESS	451 EAST GRAVES AVENUE
CITY-ST-ZIP	ORANGE CITY, FL 32763
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: Ronda S Millard 6/14/04 386-734-5566

SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL — Date — Daytime Phone #