

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 677421

FILED
Jun 29, 2009
Secretary of State

Entity Name: TREASURE COAST TRACTOR SERVICE, INC.

Current Principal Place of Business:

20450 SCHUMANN RD
FT. PIERCE, FL 34945

New Principal Place of Business:

1226 PULITZER RD
FT. PIERCE, FL 34945

Current Mailing Address:

20450 SCHUMANN RD
FT. PIERCE, FL 34945

New Mailing Address:

1226 PULITZER RD
FT. PIERCE, FL 34945

FEI Number: 59-2019451

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VICKERS, ORRIN L.
20450 SCHUMANN RD
FT. PIERCE, FL 34945 US

Name and Address of New Registered Agent:

VICKERS, ORRIN L.
1226 PULITZER RD
FT. PIERCE, FL 34945 US

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.

SIGNATURE:

06/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VICKERS, ORRIN LAWRENCE
Address: 20450 SCHUMANN RD
City-St-Zip: FT. PIERCE, FL 34945

Title: S () Delete
Name: VICKERS, DORIS
Address: 20450 SCHUMANN RD
City-St-Zip: FT. PIERCE, FL 34945

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: VICKERS, ORRIN LAWRENCE
Address: 1226 PULITZER RD
City-St-Zip: FT. PIERCE, FL 34945

Title: S (X) Change () Addition
Name: VICKERS, DORIS
Address: 1226 PULITZER RD
City-St-Zip: FT. PIERCE, FL 34945

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ORRIN LAWRENCE VICKERS

PRES

06/29/2009

Electronic Signature of Signing Officer or Director

Date