

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08622

Entity Name: MAGIC ACRES, INC.

FILED  
Jan 05, 2004  
Secretary of State

## Current Principal Place of Business:

% LAWRENCER HOOD  
5660 NE 56TH ST.  
HIGH SPRINGS, FL 32643

## New Principal Place of Business:

## Current Mailing Address:

% LAWRENCER HOOD  
5660 NE 56TH ST.  
HIGH SPRINGS, FL 32643

## New Mailing Address:

FEI Number: 59-2053673

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HOOD, LAWRENCE  
5660 NE 56 STREET  
HIGH SPRINGS, FL 32643 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PT ( ) Delete  
Name: HOOD, LAWRENCE  
Address: 5660 NE 56 STREET  
City-St-Zip: HIGH SPRINGS, FL 32643

Title: VS ( ) Delete  
Name: HOOD, JANICE  
Address: 5660 NE 56 STREET  
City-St-Zip: HIGH SPRINGS, FL 32643

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LAWRENCE HOOD

PRES

01/05/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date