

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F18696

FILED
Jul 13, 2004
Secretary of State

Entity Name: CONNER & SONS' LAND AND CATTLE CORPORATION

Current Principal Place of Business:

PINE LEVEL ROAD
PO BOX 2323
ARCADIA, FL 33821

New Principal Place of Business:

Current Mailing Address:

PINE LEVEL ROAD
PO BOX 2323
ARCADIA, FL 33821

New Mailing Address:

FEI Number: 59-2169037

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONNER, WILLIAM M., II
ROUTE 2, BOX 478
ARCADIA, FL 33821

Name and Address of New Registered Agent:

CONNER, WILLIAM M., II
9686 SW YACHT DRIVE
ARCADIA, FL 34269

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: _____

07/13/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DT () Delete
Name: MANCINI, HELENE,
Address: RT 2 BOX 214M SR 636
City-St-Zip: WAUCHULA, FL 00000,

Title: DP () Delete
Name: CONNER, WILLIAM M, I, I
Address: 2461 NW PINE CREEK AVE
City-St-Zip: ACRADIA, FL 00000,

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: WILLIAM M. CONNER II

DP

07/13/2004

Electronic Signature of Signing Officer or Director

Date