

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H88402

FILED
Jun 30, 2004
Secretary of State

Entity Name: SMITH'S TRACTOR SERVICE, INC.

Current Principal Place of Business:

% CAROL A. SMITH
2730-70TH ST, SW
NAPLES, FL 33999

New Principal Place of Business:

Current Mailing Address:

% CAROL A. SMITH
2730-70TH ST, SW
NAPLES, FL 34105 US

New Mailing Address:

FEI Number: 59-2608837 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, CAROL A.
2730-70TH ST, SW
NAPLES, FL 34105 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: DP () Delete
Name: SMITH, CAROL A.,
Address: 2730-70TH ST SW
City-St-Zip: NAPLES, FL

Title: D () Delete
Name: SMITH, GEORGE W.,
Address: 2730 70TH STREET SW
City-St-Zip: NAPLES, FL

Title: D () Delete
Name: SMITH, DARRIN T.,
Address: 1263 12TH STREET NORTH
City-St-Zip: NAPLES, FL 34102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SMITH, CAROL A.,
Address: 2730-70TH ST SW
City-St-Zip: NAPLES, FL 34105-722 US

Title: D (X) Change () Addition
Name: SMITH, GEORGE W.,
Address: 2730 70TH STREET SW
City-St-Zip: NAPLES, FL 34105-722 US

Title: D (X) Change () Addition
Name: SMITH, DARRIN T.,
Address: 1263 12TH STREET NORTH
City-St-Zip: NAPLES, FL 34102 US

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: CAROL A. SMITH

DP

06/30/2004

Electronic Signature of Signing Officer or Director

Date