


**2004 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 01, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # L01000009803  
1. Entity Name  
TRACTOR PROPERTIES, LLC



Principal Place of Business      Mailing Address  
1905 WYOMING AVE.      1905 WYOMING AVE.  
FT. PIERCE, FL 34982      FT. PIERCE, FL 34982

**DO NOT WRITE IN THIS SPACE**



03252004No Chg-LLC      CR2E083 (10/03)

4. FEI Number      Applied For  
65-1114274      Not Applicable

5. Certificate of Status Desired       \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  
KINDRED, THOMAS R SR.  
1905 WYOMING AVE.  
FT. PIERCE, FL 34982

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

**Filing Fee is \$50.00  
Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR KINDRED SR, THOMAS RL 1905 WYOMING AVE FORT PIERCE, FL 34982
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U00000100972  
04/01/04-80029-012 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *Thomas R. Kindred*      3/28/04      772/464/3974  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE      Date      Day/Time Phone