## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# M74232

FILED Jan 21, 2004 Secretary of State

Entity Name: PROFESSIONAL AGRONOMIC CONSULTING SERVICES, INC.

Current Principal Place of Business: New Principal Place of Business:

33 STONEHILL 133 STONE HILL DRIVE MAITLAND, FL 32751 US MAITLAND, FL 32751 US

Current Mailing Address: New Mailing Address:

33 STONEHILL MAITLAND, FL 32751 US 133 STONE HILL DRIVE MAITLAND, FL 32751 US

FEI Number: 59-2887889 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SMITH, LARRY M. SMITH, LARRY M.D.
133 STONEHILL DR 133 STONE HILL DRIVE
MAITLAND, FL 32751 US MAITLAND, FL 32751 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: LARRY M. SMITH 01/21/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: SMITH, LARRY M., Name: SMITH, LARRY M

 Name:
 SMITH, LARRY M.,
 Name:
 SMITH, LARRY M

 Address:
 133 STONEHILL DR
 Address:
 133 STONE HILL DRIVE

 City-St-Zip:
 MAITLAND, FL
 City-St-Zip:
 MAITLAND, FL 32751 US

Title: ( ) Delete Title: SEC ( ) Change (X) Addition

 Name:
 Name:
 SMITH, KELI K

 Address:
 Address:
 133 STONE HILL DRIVE

 City-St-Zip:
 City-St-Zip:
 MAITLAND, FL 32751 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: LARRY M. SMITH D 01/21/2004