2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Apr 25, 2005 08:00 AM Secretary of State DOCUMENT # P0000063936 R.J.'S TRACTOR SERVICE OF PALM HARBOR, INC. Mailing Address Principal Place of Business **4804 ROBERTS RD** 4804 ROBERTS RD PALM HARBOR, FL 34683 PALM HARBOR, FL 34683 CR2E034 (10/03) 02222005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3650310 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE KNIGHT, RICKY J 4804 ROBERTS RD PALM HARBOR, FL 34683 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. DATE Signature, typed or printed name of registered agent and title if applicable [NOTE. Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME KNIGHT, RICKY J 4804 ROBERTS RD STREET ADORESS U00000330**8**28 04/25/05-80174-024 158.75 PALM HARBOR, FL 34683 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED