

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 09, 2004 8:00 am**  
**Secretary of State**

03-09-2004 90033 037 \*\*\*158.75

**DOCUMENT # P01000024342**

1. Entity Name

ALL CLEAR TRACTOR SERVICE, INC.



Principal Place of Business

1875 SE ST LUCIE BLVD  
STUART FL 34996

Mailing Address

1875 SE ST LUCIE BLVD  
STUART FL 34996

2. Principal Place of Business

5755 SW Savage St  
Suite, Apt. #, etc.

3. Mailing Address

5755 SW Savage St  
Suite, Apt. #, etc.

City & State

Palm City FL

City & State

Palm City FL

Zip

34990

Country

USA

Zip

34990

Country

USA

4. FEI Number

65-1098341

Applied For

Not Applicable

5. Certificate of Status Desired

7

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

HALL, JOHN J

1875 SE ST LUCIE BLVD  
STUART FL 34996

John J. Hall

5755 SW Savage St  
Palm City, FL 34990

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

7. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable.

President

(NOTE: Registered Agent signature required when reinstating)

DATE

3/2/04

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2004 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution.

☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DP  
NAME HALL, JOHN J  
STREET ADDRESS 2095 NW FDBL HWY  
CITY-ST-ZIP STUART FL 34994 ☐ Delete

TITLE SD  
NAME HALL, KATHLEEN  
STREET ADDRESS 2095 NW FDBL HWY  
CITY-ST-ZIP STUART FL 34994 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PRESIDENT (P)(D)  
NAME John J. Hall  
STREET ADDRESS 5755 SW Savage St  
CITY-ST-ZIP Palm City, FL 34990 ☐ Change ☐ Addition

TITLE VICE PRESIDENT (V)(SD)  
NAME Kathleen Hall  
STREET ADDRESS 5755 SW Savage St  
CITY-ST-ZIP Palm City FL 34990 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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.

SIGNATURE:

President

3/2/04

Date

772-263-6001

Daytime Phone #