## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000111054

City-St-Zip:

FORT PIERCE, FL 34945

Entity Name: ST. LUCIE AG SERVICES, INC.

FILED Jan 14, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3301 N. INDIAN RIVER DRIVE FORT PIERCE, FL 34946 **Current Mailing Address: New Mailing Address:** P.O. BOX 12303 FORT PIERCE, FL 34979 FEI Number: 65-1154071 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: COPELAND, SUSAN LAWTON ESQ C/O GUNSTER, YOAKLEY & STEWART, P.A. 800 SE MONTEREY COMMONS BLVD., SUITE 200 STUART, FL 34996 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition COPELAND, SUSAN L Name: Name: 3301 N. INDIAN RIVER DR. Address: Address: City-St-Zip: FORT PIERCE, FL 34946 City-St-Zip: Title: Title: () Delete () Change () Addition HODGES, ROY A JR Name: Name: 4300 MCCARTY RD Address: Address: FORT PIERCE, FL 34945 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: () Change () Addition BEANY, AUDREY Name: Name: 851 CAMPBELL RD Address: Address:

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.

City-St-Zip:

SIGNATURE: AUDREY BEANY ST 01/14/2004