## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P02000028501**

1. Entity Name

COMMERCIAL TURF EQUIPMENT, INC.



Principal Place of Business

705 LIVE OAK STREET

UNIT K

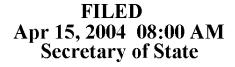
TARPON SPRINGS, FL 34689

Mailing Address

705 LIVE OAK STREET

UNIT K

TARPON SPRINGS, FL 34689





CR2E034 (10/03)

20	NO	T	M	IR	ITE	IN	THIS	SP	<b>ACE</b>
<i>3</i>			- 1			5 S V	1 1 1 1 2 3	* 75	

4. FEI Number		Applied For
01-0657701		Not Applicable
5. Certificate of Status Desired		75 Additional Required

6. Name and Address of Current Registered Agent

EICHLER, FRED J 2812 MARRIE CT. CLEARWATER, FL 33761

## DO NOT WRITE IN THIS SPACE

No Chg-P

04122004

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  FOR T. EICHER								
SIGNATURE Signature, typed or printed name of registered agent and 616 if applicable (NOTE Registered Agent signature required when reinstaing) OATE								
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	<ol> <li>Election Campaign Financ Trust Fund Contribution.</li> </ol>	ing 🔲	\$5.00 May Be Added to Fees	U00000113868 04/15/04-80026-019 150.00			
10.	OFFICERS AND DIREC	TORS		<del>. /</del>				
TRILE NAME STREET ADDRESS CITY-ST-ZIP	P EICHLER, FRED J 2812 MARRIE CT. CLEARWATER, FL 33761							
NTLE NAME STREET ADDRESS CHY+S3-ZIP	V EICHLER, RYAN E 8422 ASHFORD PL TRINITY, FL 34655							
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE			
NAME STREET ADDRESS CITY-ST-ZIP				IN .	THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
RITLE NAME STREET ADDRESS CITY-ST-ZP								
12. I hereby certify that the information supplied with this filling does not quality 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 attactment with an addissa, with all wher like empowered.								