

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000043749

FILED  
Apr 27, 2005  
Secretary of State

Entity Name: ED CANNON TRACTOR SERVICE INC.

## Current Principal Place of Business:

7006 CABANA LN  
FT PIERCE, FL 34951

## New Principal Place of Business:

7010 CABANA LN  
FT PIERCE, FL 34951

## Current Mailing Address:

7006 CABANA LN  
FT PIERCE, FL 34951

## New Mailing Address:

7010 CABANA LN  
FT PIERCE, FL 34951

FEI Number: 45-0474689

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CANNON, EDWIN K  
7006 CABANA LN  
FT PIERCE, FL 34951 US

## Name and Address of New Registered Agent:

CANNON, EDWIN K  
7010 CABANA LN  
FT PIERCE, FL 34951 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: EDWIN K. CANNON

04/27/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: CANNON, EDWIN K  
Address: 7006 CABANA LN  
City-St-Zip: FT PIERCE, FL 34951

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: CANNON, EDWIN K  
Address: 7010 CABANA LN  
City-St-Zip: FT PIERCE, FL 34951

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: EDWIN K. CANNON

P

04/27/2005

Electronic Signature of Signing Officer or Director

Date