

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000092795

Entity Name: SMITH FARMS, INC.

FILED  
Jan 26, 2004  
Secretary of State

## Current Principal Place of Business:

11887 RAINTREE DRIVE  
TEMPLE TERRACE, FL 33617

## New Principal Place of Business:

1109 WHITELAW RD  
PLANT CITY, FL 33566

## Current Mailing Address:

11887 RAINTREE DRIVE  
TEMPLE TERRACE, FL 33617

## New Mailing Address:

1109 WHITELAW RD  
PLANT CITY, FL 33566

FEI Number: 05-0551086

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SMITH, JIMMY L  
11887 RAINTREE DRIVE  
TEMPLE TERRACE, FL 33617

## Name and Address of New Registered Agent:

SMITH, JIMMY L  
1109 WHITELAW RD  
PLANT CITY, FL 33566

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

01/26/2004

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SMITH, JIMMY L  
Address: 11887 RAINTREE DRIVE  
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: D ( ) Delete  
Name: SMITH, DEBRA D  
Address: 11887 RAINTREE DRIVE  
City-St-Zip: TEMPLE TERRACE, FL 33617

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: SMITH, JIMMY L  
Address: 1109 WHITELAW RD  
City-St-Zip: PLANT CITY, FL 33566

Title: D (X) Change ( ) Addition  
Name: SMITH, DEBRA D  
Address: 1109 WHITELAW RD  
City-St-Zip: PLANT CITY, FL 33566

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: JIMMY LEE SMITH

PRES

01/26/2004

Electronic Signature of Signing Officer or Director

Date