


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2007 8:00 am
Secretary of State

02-05-2007 90083 050 ***150.00

DOCUMENT # P03000007662 1. Entity Name AFFORDABLE TRACTOR SERVICE INC.					
Principal Place of Business 2810 LAKEMONT RD MELBOURNE, FL 32935			Mailing Address 2810 LAKEMONT RD MELBOURNE, FL 32935		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		4. FEI Number 13-4232417	
City & State Zip		City & State Zip		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MILLER, ALLEN 2087-A SARNO RD MELBOURNE, FL 32935				7. Name and Address of New Registered Agent Name Caruso, Steven Street Address (P.O. Box Number is Not Acceptable) 486 N Harbor City Blvd. City Melbourne FL Zip Code 32935	
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 <u><i>Steven Caruso</i></u> DATE <u>1-9-07</u> <small>Signature, type or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstalling)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FANNON, DARROLD D 2810 LAKEMONT RD MELBOURNE, FL 32934	<input type="checkbox"/> Delete			
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <u><i>Kristen Fann</i></u>				Date <u>2-2-07</u>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				<small>Date Daytime Phone #</small>	