

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000018086

FILED  
Feb 27, 2004  
Secretary of State

Entity Name: SMITTY'S LAWN SERVICES, INC.

## Current Principal Place of Business:

5418 WHITE AVE  
PORT CHARLOTTE, FL 33981

## New Principal Place of Business:

## Current Mailing Address:

5418 WHITE AVE  
PORT CHARLOTTE, FL 33981

## New Mailing Address:

FEI Number: 65-0468347

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HADNAGY, JAMES R  
5348 DREW RD  
VENICE, FL 34293 US

## Name and Address of New Registered Agent:

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:

Title: D/P ( ) Delete  
Name: SMITH, JAMES R II  
Address: 5418 WHITE AVE  
City-St-Zip: PORT CHARLOTTE, FL 33981

Title: DVP ( ) Delete  
Name: SMITH, SUSAN L  
Address: 5418 WHITE AVE  
City-St-Zip: PORT CHARLOTTE, FL 33981

Title: T ( ) Delete  
Name: SMITH, TIMOTHY E  
Address: 5418 WHITE AVE  
City-St-Zip: PORT CHARLOTTE, FL 33981

Title: S ( ) Delete  
Name: SMITH, JAMES R III  
Address: 13537 ISABELL AVE.  
City-St-Zip: PORT CHARLOTTE, FL 33981

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JAMES R SMITH 2ND

D/P

02/27/2004

Electronic Signature of Signing Officer or Director

Date