


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 12, 2004 08:00 AM
Secretary of State

DOCUMENT # P94000045114 1. Entity Name CIRCLE M RANCH, INC.	
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Principal Place of Business 902 E. ALEXANDER ST. PLANT CITY, FL 33566	Mailing Address P.O. BOX 2636 PLANT CITY, FL 33564-2636
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07072004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3324294	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MARTIN, E. SNOW JR. 400 LAKE MORTON DR. LAKELAND, FL 33801

DO NOT WRITE IN THIS SPACE

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>E. Snow Martin Jr. Registered Agent</u> <small>Signature, typed or printed name of registered agent and then applicable (NOTE: Registered Agent signature required when appointing)</small>	DATE <u>7/7/04</u>

FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD MADONIA, BATISTA SR. 902 S. ALEXANDER ST. PLANT CITY, FL 33566
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STDV MADONIA, EVELYN 902 S. ALEXANDER ST. PLANT CITY, FL 33566
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07/12/04-80010-001 558.75

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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>[Signature]</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	DATE <u>7/7/04</u> (800) 557-7751 <small>Date Daytime Phone #</small>