2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2007
Secretary of State

DOCUMENT# P95000025309

Entity Name: FAIR US TRACTOR SERVICE, INC.

Current Principal Place of Business:

1114 SW 15TH STREET
OKEECHOBEE, FL 34974

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 938
OKEECHOBEE, FL 34973

New Mailing Address:

FEI Number: 65-0649553 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BRENNAN, JOHN T
519 SO. INDIANA RIVER DRIVE
FORT PIERCE, FL 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: PHARES, NANCY P
Address: P.O. BOX 938
City-St-Zip: OKEECHOBEE, FL 34973

Title: VP ( ) Delete
Name: PHARES, W. BRADLEY
Address: P.O. BOX 938
City-St-Zip: OKEECHOBEE, FL 34973

Title: S ( ) Delete
Name: PHARES, BRENT E
Address: P.O. BOX 938
City-St-Zip: OKEECHOBEE, FL 34973

Title: T ( ) Delete
Name: PHARES, BRIAN K.
Address: P.O. BOX 938
City-St-Zip: OKEECHOBEE, FL 34973

Title: CEO ( ) Delete
Name: PHARES, WILLIAM E.
Address: P.O. BOX 938
City-St-Zip: OKEECHOBEE, FL 34973

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:

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: NANCY P. PHARES P 05/01/2007

Electronic Signature of Signing Officer or Director Date