

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 30, 2007 8:00 am
Secretary of State

08-30-2007 90001 019 ***158.75

DOCUMENT # P97000003286					
1. Entity Name PROFESSIONAL AGRICULTURAL LAND MANAGEMENT, INC.					
Principal Place of Business 18671 PALM CREEK DRIVE NORTH FORT MYERS, FL 33917			Mailing Address 18671 PALM CREEK DRIVE NORTH FORT MYERS, FL 33917		
2. Principal Place of Business - No P.O. Box # 788 Old Chicken Farm Rd		3. Mailing Address P.O. Box 1145			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Young Harris GA		City & State Young Harris GA		4. FEI Number 65-0722207	
Zip 30582		Country		Applied For Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent RIGSBY, ROBERT W 18671 PALM CREEK DRIVE, N. NORTH FORT MYERS, FL 33917			7. Name and Address of New Registered Agent Name <u>Robert A Hull</u> Street Address (P.O. Box Number is Not Acceptable) <u>1342 Colonial Blvd Suite C 20</u> City <u>Fort Myers</u> <u>FL</u> <u>33907</u>		
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>Robert A Hull</u>				DATE <u>28.23.07</u>	
Signature, typed or printed name of registered agent and fee applicable. (NOTE: Registered Agent signature required when reinstating)					
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D <input type="checkbox"/> Delete RIGSBY, ROBERT W 18671 PALM CREEK DRIVE NORTH FT MYERS, FL 33917		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 788 Old Chicken Farm Rd Young Harris GA 30582	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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>Robert W. Riggsby</u>			SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR <u>Robert W. Riggsby</u>		
Date <u>8-27-04</u>			Daytime Phone #		