


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 26, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # P97000053447 1. Entity Name WITTER LAND & CATTLE COMPANY, INC.	
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Principal Place of Business 10575 NW 76TH TERRACE OCALA, FL 34482	Mailing Address 10575 NW 76TH TERRACE OCALA, FL 34482 US
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04222004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-1008176	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**

COVERT, CONSTANCE M  
10575 NW 76TH TERRACE  
OCALA, FL 34482

**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 *Constance M. Covert* CONSTANCE M. COVERT 4-21-04  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$350.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D COVERT, CONSTANCE M 10575 NW 76TH TERRACE OCALA, FL 34482
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WITTER, DAVID G 10575 NW 76TH TERRACE OCALA, FL 34482
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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000000128734  
04/26/04-80051-009 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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: *Constance M. Covert* CONSTANCE M. COVERT 4-21-04 (352) 237-1477  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #  
1477