

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000106016

FILED
Apr 28, 2004
Secretary of State

Entity Name: TOBY'S PLANTATION, INC.

Current Principal Place of Business:

3550 NE HIGHWAY 70
ARCADIA, FL 32466

New Principal Place of Business:

Current Mailing Address:

3550 NE HIGHWAY 70
ARCADIA, FL 32466

New Mailing Address:

4917 SE BROWN ROAD
ARCADIA, FL 32466

FEI Number: 59-3483951

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PINEL, WILLIAM T
2528 NE HIGHWAY 70
ARCADIA, FL 32466 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: P () Delete
Name: PINEL, WILLIAM T
Address: 2528 NE HIGHWAY 70
City-St-Zip: ARCADIA, FL 34266

Title: TC () Delete
Name: PINEL, SANDY M
Address: 2528 NE HIGHWAY 70
City-St-Zip: ARCADIA, FL 34266

Title: D () Delete
Name: PINEL, WILLIAM T
Address: 2528 NE HIGHWAY 70
City-St-Zip: ARCADIA, FL 34266

Title: D () Delete
Name: PINEL, SANDY M
Address: 2528 NE HIGHWAY 70
City-St-Zip: ARCADIA, FL 34266

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PINEL, WILLIAM T
Address: 4917 SE BROWN ROAD
City-St-Zip: ARCADIA, FL 34266

Title: TC (X) Change () Addition
Name: PINEL, SANDY M
Address: 4917 SE BROWN ROAD
City-St-Zip: ARCADIA, FL 34266

Title: D (X) Change () Addition
Name: PINEL, WILLIAM T
Address: 4917 SE BROWN ROAD
City-St-Zip: ARCADIA, FL 34266

Title: D (X) Change () Addition
Name: PINEL, SANDY M
Address: 4917 SE BROWN ROAD
City-St-Zip: ARCADIA, FL 34266

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: SANDY MICHELLE PINEL

TC

04/28/2004

Electronic Signature of Signing Officer or Director

_____ Date