

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000073236

Entity Name: ROW LAND SERVICES, INC.

FILED
Jan 13, 2005
Secretary of State

Current Principal Place of Business:

461 CYPRESS ST
ALTAMONTE SPRINGS, FL 327142460

New Principal Place of Business:

1410 S GRANT STREET
LONGWOOD, FL 327506536 US

Current Mailing Address:

461 CYPRESS ST
ALTAMONTE SPRINGS, FL 327142460

New Mailing Address:

1410 S GRANT STREET
LONGWOOD, FL 327506536

FEI Number: 59-3528838

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PHILLIPS, R PATRICK
200 N THORNTON AVE
ORLANDO, FL 32801 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: D () Delete
Name: HUDSON, THOMAS R
Address: 461 CYPRESS ST
City-St-Zip: ALTAMONTE SPRINGS, FL 327142460

Title: D () Delete
Name: HUDSON, D FRANK
Address: 40813A ORLANDO AVE
City-St-Zip: OCOEE, FL 34761

Title: D () Delete
Name: HUDSON, JOSEPH P
Address: 366 ORANGE AVE
City-St-Zip: LONGWOOD, FL 32750

Title: D () Delete
Name: CROWSTON, C MICHAEL
Address: 11070 DELFORD CIRCLE
City-St-Zip: DALLAS, TX 75228

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HUDSON, THOMAS R
Address: 1410 S GRANT STREET
City-St-Zip: LONGWOOD, FL 327506536 US

Title: D (X) Change () Addition
Name: HUDSON, D FRANK
Address: 1410 S GRANT STREET
City-St-Zip: LONGWOOD, FL 327506536

Title: D (X) Change () Addition
Name: HUDSON, JOSEPH P
Address: 1731 PERCH LANE
City-St-Zip: SANFORD, FL 32771

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

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: THOMAS R HUDSON

D

01/13/2005

Electronic Signature of Signing Officer or Director

Date