## 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## Apr 19, 2004 8:00 am ANNUAL REPORT (AR) Secretary of State DOCUMENT # P98000108296 04-19-2004 90725 017 \*\*\*150.00 PRO LAND CLEARING, INC. Principal Place of Business Mailing Address 6923 13TH AVENUE EAST BRADENTON FL 34208 6923 13TH AVENUE EAST **BRADENTON FL 34208** 2. Principal Place of Business 3. Mailing Address 4207 3812 AVE E 4207 385 CR2E034 (11/03) City & State City & State 4. FEI Number Applied For 65-0884541 Not Applicable Bradenton \$8.75 Additional 5. Certificate of Status Desired 454 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Benner BENNETT, DIANE T 6923 13TH AVENUE EAST Street Address (P.O. Box Number is Not Acceptable) **BRADENTON FL 34208** 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, 4-16-04 (NOTE, Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE TITLE ☐ Delete 4207 382 Ave E D Change BENNETT, DIANE NAME NAME STREET ADDRESS 6923 -13TH AVE E STREET ADDRESS **BRADENTON FL 34208** CITY-ST-ZIP CITY-ST-789 VΡ TITLE TITLE □ Delete BENNETT, JOHN R NAME NAME 6923 -13TH AVE E STREET ADDRESS STREET ADDRESS BRADENTON FL 34208 CITY-ST-ZIP CITY-ST-ZIP . Delete\_ TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CiTY-ST-7/P ☐ Delete Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY -ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7(P 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.

FILED