DO NOT WRITE IN THIS SPACE

5. Name and Address of Current Registered Agent

SAPP, DEMPSEY R., JR.
116 N.W., 16TH AVE.
GAINESVILLE, FL 32601

DO NOT WRITE IN THIS SPACE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

<table>
<thead>
<tr>
<th>TITLE</th>
<th>NAME</th>
<th>STREET ADDRESS</th>
<th>CITY - ST - ZIP</th>
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<tr>
<td>C</td>
<td>SAPP, DEMPSEY R</td>
<td>17445 SW 132 AVE</td>
<td>LAKE BUTLER, FL 32054</td>
</tr>
<tr>
<td>PD</td>
<td>SAPP, DEMPSEY R JR.</td>
<td>18706 SW 132 AVE</td>
<td>LAKE BUTLER, FL 32054</td>
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<td>STD</td>
<td>SAPP, MARGIE B</td>
<td>17445 SW 132 AVE</td>
<td>LAKE BUTLER, FL 32054</td>
</tr>
<tr>
<td>D</td>
<td>JOHNSON, RANDY S</td>
<td>116 NW 10TH AVE</td>
<td>GAINESVILLE, FL 32601</td>
</tr>
</tbody>
</table>

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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: [signature]

DATE: 01/09/04-80021-018 150.00

ADDRESSES FOR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1152-306-2661

FILED
Jan 09, 2004 08:00 AM
Secretary of State