2005 FOR PROFIT CORPORATION

FILED **ANNUAL REPORT** Feb 26, 2005 08:00 AM **DOCUMENT # 489125 Secretary of State** 1. Entity Name J.W. AUSTIN INDUSTRIES, INC. Principal Place of Business Mailing Address 7713 ELLIS ROAD 7713 ELLIS ROAD W. MELBOURNE, FL 32904 W. MELBOURNE, FL 32904 02072005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-1729633 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FRESE, GARY, B, ESQ DO NOT WRITE 930 S HARBOR CITY BLVD., SUITE 505 MELBOURNE, FL 32901 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. (NOTE: Registered Agent signature required when rematating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. VDP9 TITLE MURPHY, LUCILLE A. NAME 7713 ELLIS ROAD STREET ADDRESS COY-ST-ZP MELBOURNE, FL 92/26/95-80005-021 150.00 TITLE NUME AUSTIN, STEPHEN C 7713 ELLIS RD STREET ADDRESS CITY-ST-ZIP MELBORNE, FL TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE

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:

NAME STREET ADDRESS CITY-ST-ZIP

Lucille A Murphy 2-23