

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2005 8:00 am
Secretary of State

04-20-2005 90317 015 ***150.00

DOCUMENT # G03122
 1. Entity Name
PENCE LAND MATERIALS, INC.



Principal Place of Business Mailing Address
3115 DIXIE HWY., NE. **PO BOX 060087**
PALM BAY, FL 32905 US **PALM BAY, FL 32906-0087 US**

40003430



02172005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For
59-2236032 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
PENCE, ROY
3115 DIXIE HWY NE
PALM BAY, FL 32905

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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.

SIGNATURE: (NOTE Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	PENCE, ROY J
STREET ADDRESS	3115 DIXIE HWY NE
CITY-ST-ZIP	PALM BAY, FL 00000,
TITLE	DVP
NAME	PENCE, HERSCHEL
STREET ADDRESS	3115 DIXIE HWY NE
CITY-ST-ZIP	PALM BAY, FL 00000,
TITLE	DST
NAME	PENCE, ALENE
STREET ADDRESS	3115 DIXIE HWY NE
CITY-ST-ZIP	PALM BAY, FL 00000,
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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 reports 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: **4/15/05** **321 723 6107**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #