## 2005 FOR PROFIT CORPORATION

## Jan 24, 2005 8:00 am ANNUAL REPORT **Secretary of State DOCUMENT # H77535** 01-24-2005 90045 013 \*\*\*150.00 BRENNAN, HAYSKAR, WALKER, SCHWERER, DUNDAS & MCCAIN, P.A. Mailing Address Principal Place of Business NANCONOR % JOHN T. BRENNAN % JOHN T. BRENNAN 519 SOUTH INDIAN RIVER DRIVE 519 SOUTH INDIAN RIVER DRIVE FORT PIERCE, FL 34950 FORT PIERCE, FL 34950 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01142005 Chg-P CR2E034 (10/03) City & State City & State Applied For 4. FEI Number 59-2579109 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name STEPHEN H. HAYSKAR BRENNAN, JOHN T. Street Address (P.O. Box Number is Not Acceptable) 519 S. INDIAN RIVER DRIVE 519 SOUTH INDIAN RIVER DRIVE FORT PIERCE, FL 34950 34950 FT. PIERCE 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 PRESIDENT 1/18/2005 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE PΠ Delete TITLE President Change Addition BRENNAN, JOHN T. NAME NAME Stephen G. Hayskar 519 S. INDIAN RIVER DR. STREET ADDRESS STREET ADDRESS 519 S. Indian River Drive CITY-ST-ZIP FORT PIERCE, FL CITY-ST-ZIP Pierce, FL 34950 TD Change ☐ Delete TITLE TITLE Addition HAYSKAR, STEPHEN G. NAME NAME 519 S. INDIAN RIVER DR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP FORT PIERCE, FL ☐ Delete TITLE Secretary Change ☐ Addition TITLE WALKER, JAMES T. NAME James T. Walker STREET ADDRESS STREET ADDRESS 519 S. INDIAN RIVER DR. 519 S. Indian River Drive FORT PIERCE, FL CITY-ST-ZIP CITY-ST-ZIP Ft. Pierce, FL 34950 ☐ Delete Vice-President ☐ Addition TITLE TITLE SCHWERER, ROBERT V. NAME NAME Robert V SChwerer Drive STREET ADDRESS 519 S. INDIAN RIVER DR STREET ADDRESS CITY-ST-ZIP FORT PIERCE, FL CITY-ST-ZIP Ft. Pierce, FL 34950 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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.

STREET ADDRESS

CITY-ST-ZIP

TITLE

SIGNATURE:

TITLE

NAME STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Dolete

PRESIDENT

1/18/2004

☐ Change

☐ Addition

FILED

Daytime Phone #