2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000119958

Entity Name: BRANNEN AND ESPY'S PROPERTIES, INC.

FILED Apr 27, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

12643 SAND TRAP CT. P.O. BOX 57922

JACKSONVILLE, FL 32225 JACKSONVILLE, FL 32241 US

Current Mailing Address: New Mailing Address:

12643 SAND TRAP CT. 7801 POINT MEADOWS DRIVE

JACKSONVILLE, FL 32225 UNIT 2202

JACKSONVILLE, FL 32256 US

FEI Number: 16-1657095 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ESPENSCHIED, ROCKY L
12643 SAND TRAP CT.
JACKSONVILLE, FL 32225

ESPENSCHIED, ROCKY L
7801 POINT MEADOWS DRIVE
UNIT 2202
JACKSONVILLE, FL 32256 US

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.

SIGNATURE: ROCKY L ESPENSCHIED 04/27/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD () Delete Title: PSTD (X) Change () Addition

Name: ESPENCHIED, ROCKY L
Address: 12643 SAND TRAP CT.
Address: 7801 POINT MEADOWS DRIVE, UNIT 2202

Address: 12643 SAND TRAP CT. Address: 7801 POINT MEADOWS DRIVE, UNIT 2202 City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip: JACKSONVILLE, FL 32256 US

Title: D () Delete Title: VP (X) Change () Addition

 Name:
 BRANNEN, JÄMES R
 Name:
 BRANNEN, JÄMES R

 Address:
 4243 KINCARDINE DR.
 Address:
 4243 KINCARDINE DR.

 City-St-Zip:
 JACKSONVILLE, FL 32257
 City-St-Zip:
 JACKSONVILLE, FL 32257 US

Title: D () Delete Title: D (X) Change () Addition

Name: STALTER, TIMOTHY L
Address: 2279-3 SEMINOLE RD. Address: 2279-3 SEMINOLE RD. STALTER, TIMOTHY L

City-St-Zip: ATLANTIC BEACH, FL 32233 City-St-Zip: ATLANTIC BEACH, FL 32233 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROCKY L ESPENSCHIED PSTD 04/27/2004