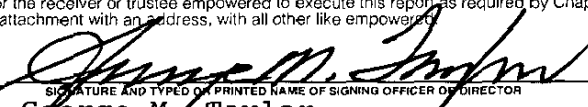


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2004 8:00 am
Secretary of State

04-05-2004 90072 027 ***150.00

DOCUMENT # P36462 1. Entity Name REED MANUFACTURING COMPANY, INC.					
Principal Place of Business 1030 S VETERANS BLVD BOX 650 TUPELO, MS 38802			Mailing Address 1030 S VETERANS BLVD BOX 650 TUPELO, MS 38802		
2. Principal Place of Business 1321 S. Veterans Blvd.		3. Mailing Address 1321 S. Veterans Blvd.			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		4. FEI Number 64-0389244	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent TAYLOR, GEORGE M. 6710 MAIN STREET SUITE 320 MIAMI LAKES, FL 33014				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Suite 238 City FL Zip Code	
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NELSON, EDWARD R. 1030 S VETERANS BLVD TUPELO, MS	☐ Delete ☒ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STV TAYLOR, GEORGE M. 1030 S VETERANS BLVD TUPELO, MS	☐ Delete ☒ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD REED, JACK R. 1030 S VETERANS BLVD TUPELO, MS	☐ Delete ☒ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete ☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete ☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete ☐ Change ☐ Addition			
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 empowerments.					
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR George M. Taylor			3/29/04 662-842-4472 Date Daytime Phone #		

94044124

