


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2004 08:00 AM
Secretary of State

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| DOCUMENT # P98000069543 1. Entity Name RED STICK ACQUISITION CORPORATION |  |
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| Principal Place of Business 5070 N HWY A 1A STE D INDIAN RIVER SHORES, FL 32963 | Mailing Address PO BOX 3686 VERO BCH, FL 32964 |
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03112004 No Chg-P CR2E034 (10/03)

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| 4. FEI Number 59-3526591 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent CALDWELL, WILLIAM W 756 BEACHLAND BLVD. VERO BEACH, FL 32963 | DO NOT WRITE IN THIS SPACE |
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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

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| 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> | \$5.00 May Be Added to Fees |
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000000100121
 03/31/04-80032-008 150.00

| 10. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | PD SCHWERIN, WARREN L 667 OCEAN RD VERO BEACH, FL 32963 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D KREITLER, RICHARD 255 INDIAN HARBOR RD VERO BEACH, FL 32963 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D GORDON, RICHARD 125 DEERCLIFF RD AVON, CT 06001 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D BLAICHER, FREDERICK M 2770 INDIAN RIVER BLVD VERO BEACH, FL 32963 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D WOODRUFF, ANTHONY C BOX 795 DORSET, VT 05251 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | S WILSON, SHERRI D 100-25 CHATEAU LANE HAWTHORNE, NY 10532 |

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 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: Warren L Schwerin DATE: 3-12-04 DAYTIME PHONE #: 772-562-9822
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR