## 2004 FOR PROFIT CORPORATION

## FILED ANNUAL REPORT Apr 09, 2004 08:00 AM Secretary of State **DOCUMENT # 284340** PENCE INVESTMENTS INC Principal Place of Business Mailing Address 3115 DIXIE HWY N E 3115 DIXIE HWY N E P 0 BOX 101 P 0 B0X 101 PALM BAY, FL 32905 PALM BAY, FL 32905 02172004 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1053166 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent HERSCHL PENCE DO NOT WRITE 7580 PINECREST AVENUE MELBOURNE, FL 32901 IN THIS SPACE 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, 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, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees U00000108099 10. OFFICERS AND DIRECTORS TITLE NAME PENCE, HERSCHL STREET ADDRESS 7580 PINECREST AVE. CITY-ST-ZIP MELBOURNE, FL VDST TITLE NAME PENCE, ALENE STREET ADDRESS 7580 PINECREST AVE CITY-ST-ZIP MELBOURNE, FL TITLE PENCE, ROY J NAME STREET ADDRESS 7580 PINECREST AVE DO NOT WRITE CITY-ST-ZIP MELBOURNE, FL प्रशाह IN THIS SPACE STREET ADDRESS CITY-ST-ZIP MLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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.

TED NAME OF SIGNING OFFICER OR DIRECTOR

TITLE NAME STREET ADDRESS C11Y-51-ZIP