2005 FOR PROFIT CORPORATION

FILED - ANNUAL REPORT Feb 21, 2005 08:00 AM **DOCUMENT # 384886 Secretary of State** 1. Entity Name BRITTON STAMPS BUILDERS, INC. Principal Place of Business Mailing Address 101 DUNCAN AVE 101 DUNCAN AVE P.O. BOX 9 P.O. BOX 9 GULF BREEZE, FL 32561 GULF BREEZE, FL 32561 02152005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1355132 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent STAMPS, BRITTON DO NOT WRITE 101 DUNCAN AVENUE GULF BREEZE, FL 32561 IN THIS SPACE 5. 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 alignature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 18 \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. PTD TITLE NAME STAMPS, BRITTON STREET ADDRESS 101 DUNCAN AVE **GULF BREEZE, FL** CITY-ST-ZIP --- [1000017236636 TITLE (1872) /US-80026-02**4** | 150.**m** NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS 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

s, with all other like empowered.

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: