2004 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 25, 2004 08:00 AM Secretary of State **DOCUMENT # 400039** 1. Entity Name RICHBURG & SONS, INC. Principal Place of Business Mailing Address 2250 B HIGHWAY 98 2250 B HIGHWAY 98 MARY ESTHER, FL 32569 .US MARY ESTHER, FL 32569 US 01282004 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1437548 Not Applicable \$8.75 Additional Fee Required 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent RICHBURG, CHARLES B DO NOT WRITE 443 SANDY RIDGE CIR. MARY ESTHER, FL 32569 IN THIS SPACE 1. 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, lyped or printed aspect registered agent and title if applicable (NOTE: Registered Agent signature regulard when reinstating) DATE 1100000065578 9. Election Campaign Financing \$5,00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 02/25/04-80043-008 15D.**o**n Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE RICHBURG.PETE NAME 443 SANDY RIDGE CIRCLE STREET ADDRESS CITY-ST-ZIP MARY ESTHER, FL MILE RICHBURG, PATRICIA L MALE STREET ADDRESS 443 SANDY RIDGE CIRCLE MARY ESTHER, FL CITY-ST-ZIP MILE RICHBURG, CHARLES B. NAME 443 SANDY RIDGE CIRCLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP MARY ESTHER, FL ШЩ IN THIS SPACE NAME RICHBURG, PETER J STREET ADDRESS 457 SANDY RIDGE CIRCLE MARY ESTHER, FL CITY-ST-ZIP TITLE NUF STREET ADDRESS CMY-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 regard 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 to 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: SIGNATURE AND STREET OR PRINTED NAME OF FIGURING OFFICER OR DETECTOR

TITLE NAME STREET ADDRESS

2/22/04

845-58/-5368

FILED