2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 13, 2005 08:00 AM Secretary of State

DOCUMENT # 434144				Secretary of Stat			
1. Entity Nam		- -		} 			
Principal Plac 706 BURLEIO P.O. BOX 10: TAVARES, FL	GH BLVD 82	Mailing Address 706 BURLEIGH BLVD P.O. BOX 1082 TAVARES, FL 32778					
				03252005	No Chg-P	CR2E034 (Mint diwilds in Idus
	O NOT WRITE	IN THIS SPA	CE	4. FEI Number 59-1494			Applied For Not Applicable
		-i-to-ad Appen	1	5. Certificate of	f Status Desired		75 Additional Required
6. Name and Address of Current Registered Agent MARY M MCDANIEL & ASSOCIATES PA 1330 CITIZENS BLVD, SUITE 302 LEESBURG, FL 34748					NOT WI HIS SP		
	e named onlity submits this statement for t	he purpose of changing its registe	ared office or register	red agent, or both	n, in the State of Flor	ida. Lam famili	ar with, and accept
SIGNATURE_	tions of registered agent. Signature, typed or protect name of registered agent an	fulle of applicables. (NOTE, Register	red Agent alginatura requires	o when nenstating)		DATE	
FiL After M	E NOWIN FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	9. Election Campaign Fin		.00 May Be led to Fees			
10.	OFFICERS AND D	RECTORS				alalisi (1975)	
TITLE NAME STREET ADDRESS CHY-SI-ZIP	ST SMALLWOOD, NELL W. 201 DELAWARE TAVARES, FL						
TITLE NAME STREET ADDRESS	P SMALLWOOD, JOE PATRICK 706 BURLEIGH BLVD.				04/1920S	180 1395 -80032-0	<i>)</i> 150.00
TITLE NAME	TAVARES, FL	<u>2</u>					
STREET ADDRESS CHY-SI-ZIP		, 4		ten di bisanti kapati da 19	NOT W		
HILE NAME STREET ADURESS CITY-ST-ZIP					THIS SP	ACE	
mile name sinelt addiess							
CITY -ST - ZIP			1				a (1975) i propinsi kanala

12. Thereby cortify 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: On Patrick Smallwood Joe Patrick Smallwood

name Sireey address City-St-Lip

april 10,2005

352-343-3951

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