2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2005
Secretary of State

DOCUMENT# 443288

Entity Name: MERIT INDUSTRIES, INC.

Current Principal Place of Business:

P.O. BOX 192
ALPHARETTA, GA 300090192

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 192
ALPHARETTA, GA 300090192

New Mailing Address:

FEI Number: 59-1515343 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JACKSON, CLAUDE W.
3963-2 CONFERENCE PT RD
STE 111
JACKSONVILLE, FL 32210 US

Name and Address of New Registered Agent:

JACKSON, CLAUDE W.
410-9 BLANDING BLVD
BOX 201
ORANGE PARK, FLORIDA, FL 32073 US

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.

SIGNATURE: _____ 04/17/2005
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: TPD ( ) Delete
Name: JACKSON, CLAUDE W,
Address: P.O. BOX 192 N/A
City-St-Zip: ALPHARETTA, GA

Title: SD ( ) Delete
Name: JACKSON, ANNIE J
Address: P.O. BOX 192
City-St-Zip: ALPHARETTA, GA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CLAUDE W. JACKSON TPD 04/17/2005
Electronic Signature of Signing Officer or Director — Date