......2005 FOR PROFIT CORPORATION ANNUAL REPORT

TITLE NAME STREET ADDRESS CITY: ST-ZIP

Jan 13, 2005 08:00 AM **DOCUMENT # 470246 Secretary of State** 1. Entity Name RONALD T. HOPWOOD, INC. Principal Place of Business Mailing Address 7373 CIRCLE DRIVE 7373 CIRCLE DRIVE LADY LAKE, FL 32159 LADY LAKE, FL 32159 01072005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEi Number Applied For 59-1357731 Not Applicable \$8.75 Additional Fee Required 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent SUMMERS, GARY DO NOT WRITE 380 W. ALFRED STREET TAVARES, FL 32778 IN THIS SPACE . 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 signature required when reinstating) DATE FILE NOW!! FEE 18 \$150.00 After May 1, 2005 Fee will be \$550.00 . Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE HOPWOOD, RONALD T. NAME 7373 CIRCLE DRIVE STREET ADDRESS U000n0180071 CITY-ST-ZIP LADY LAKE, FL 01/13/05-80043-007 150.00 me HOPWOOD, SARA E. SYPKET ADORESS 7373 CIRCLE DRIVE CITY-ST-ZIP LADY LAKE, FL TITLE HOPWOOD, CAROL A. NAME STREET ADDRESS 37 IDAHO AVENUE DO NOT WRITE WHITEFISH, MT CITY-ST-ZIP TITLE IN THIS SPACE NME HOPWOOD, ROBERT S. STREET ADDRESS 7373 CIRCLE DRIVE CITY-ST-ZIP LADY LAKE, FL. MIE NAME HOPWOOD, THOMAS A. STREET ADDRESS MAIN AVE OKAHUMPKA, FL CITY-ST-ZP

FILED

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 eath; 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: Royald T. Hopwood RONALD T. HOPWOOD 70m05 (352) 753-2471