2004 FOR PROFIT CORPORATION ANNUAL REPORT

May 03, 2004 -08:00 AM DOCUMENT # 555593 **Secretary of State** 1. Entity Name BARNES & PENDERGAST, INC. Principal Place of Business Mailing Address **201 22 STREET S** 201 22 STREET S SAINT PETERSBURG, FL 33712 US SAINT PETERSBURG, FL 33712 US 04302004 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FFI Number Applied For 59-2062391 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent BRYANT, GENE DO NOT WRITE 201 22 STREET S SAINT PETERSBURG, FL 33712 IN THIS SPACE 8. 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 Sonature, typed or privited name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME BARNES, ROBERT B STREET ADDRESS 1831 NEBRASKA AVE NE U00000149284 05/03/04-80180-025 150.00 CRY-ST-ZP ST PETERSBURG, FL 33703 IIILE NAME PENDERGAST, WILLIAM L STREET ADDRESS 1600 NORTH SHORE DRIVE NE CITY-ST-ZIP ST. PETERSBURG, FL 33704 TITLE ST BRYANT, EUGENE E MALK STREET ADDRESS 1600 NORHT SHORE DR. NE DO NOT WRITE CITY-ST-7/2 ST. PETERSBURG, FL 33704 nnf IN THIS SPACE NAME STREET ADDRESS CITY-ST-78P TITLE NAME STREET ADDRESS CTY-57-782 TITLE NAME

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 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 piler like empowered.

SIGNATURE:

STREET ADDRESS

HIGHATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER ON DIRECTOR

4-30-04

727-327-913X

FILED

Daytima Phone #