2004 FOR PROFIT CORPORATION

FILED **ANNUAL REPORT** Jan 20, 2004 08:00 AM DOCUMENT # 555867 **Secretary of State** PERRY SMITH AND SONS, INC. Principal Place of Business Mailing Address NEW PINE RIDGE RD P 0 BOX 742 OKEECHOBEE, FL 34973 HWY 70W US OKEECHOBEE, FL 34972 CR2E034 (10/03) 01082004 No Cha-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-1784779 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SMITH, C. PERRY DO NOT WRITE HIGHWAY 70 WEST P.O.BOX 742 IN THIS SPACE OKEECHOBEE, FL 33472 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 Signature, typed or printed name of registered eigent and title 4 applicable. (NOTE: Registered Agent signature required when reinstaing) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 П Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PΠ TITLE SMITH, C. PERRY NAME STREET ADDRESS HIGHWAY 70 WEST BOX 742 U00000007543 01/20/04-80029-003 150.00 CITY-ST-ZIP OKEECHOBEE FL, BM F SMITH, DALE W. NAME STREET ADDRESS HWY 70 W, P O BOX 742 CITY-ST-ZIP OKEECHOBEE, FL ST TITLE NAME SMITH, CAROLYN HIGHWAY 70 WEST BOX 742 STREET ADDRESS DO NOT WRITE CITY-ST-ZIP OKEECHOBEE, FL IN THIS SPACE HILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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 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:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP