2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 580025

Entity Name: BRUCE'S, INC.

FILED Apr 29, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2200 NE 36 AVE 2550 NE 36 AVE SUITE 301 SUITE A

OCALA, FL 34470 US OCALA, FL 34470 US

Current Mailing Address: New Mailing Address:

2200 NE 36 AVE POB 6480

SUITE 301 OCALA, FL 34478 US

OCALA, FL 34470 US

FEI Number: 59-1836587 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BRUCE, MICHAEL J BRUCE, MICHAEL J 2200 NÉ 36 AVE 2550 NÉ 36 AVE SUITE A SUITE 301 OCALA, FL 34470 US OCALA, FL 34470 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: MICHAEL J. BRUCE 04/29/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition BRUCE, MICHAEL J BRUCE, MICHAEL J Name: Name:

2200 NE 36 AVE, SUITE 301 Address: 2550 NE 36 AVE, SUITE A Address: City-St-Zip: OCALA, FL 34470 US City-St-Zip: OCALA, FL 34478 US

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: MICHAEL J. BRUCE PTD 04/29/2004