2004 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # 636832 02-25-2004 90013 005 ***150.00 RIDGE BUILDERS, INC. Principal Place of Business Mailing Address 54010496 707 JONES AVE 707 JONES AVE HAINES CITY, FL 33844 HAINES CITY, FL 33844 CR2E034 (10/03) 02092004 No Chq-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-1938405 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent NETTLETON, ROBERT C DO NOT WRITE 30 NORTH 6TH STREET HAINES CITY, FL 33844 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE ESTATE OF HERBERT W. KEY, DECEASED NAME STREET ADDRESS 143 PALM PLACE CITY-ST-ZIP HAINES CITY, FL 33844 TITLE STREET ADDRESS CITY-ST-ZIP STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP 12. Thereby 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.

FILED Feb 25, 2004 8:00 am

See Attached Letters of Administration

SIGNATURE:

Herbert W. Key, Deceased

PRINTED NAME OF SIGNANG OFFICER ORDINECTOR
AS Personal Representative

54010496 # 636832

IN THE CIRCUIT COURT OF THE TENTH JUDICIAL CIRCUIT IN AND FOR POLK COUNTY, FLORIDA, PROBATE DIVISION

COPY	
CUL	l

FILE	NO.	02CP-0089			
------	-----	-----------	--	--	--

IN RE: ESTATE OF HERBERT W. KEY,

DECEASED.

LETTERS OF ADMINISTRATION

TO ALL WHOM IT MAY CONCERN:

WHEREAS, HERBERT W. KEY, a resident of Polk County, Florida, died on December 18, 2001, owning assets in the State of Florida, and

WHEREAS, BETTY J. KEY has appointed personal been representative of the estate of the decedent and has performed all acts prerequisite to issuance of Letters of Administration in the estate,

NOW, THEREFORE, I, the undersigned circuit judge, declare BETTY J. KEY to be duly qualified under the laws of the State of Florida to act as personal representative of the estate of HERBERT W. KEY, with full power to administer the estate according to law; to ask, demand, sue for, recover and receive the property of the decedent; to pay the debts of the decedent as far as the assets of the estate will permit and the law directs; and to make distribution of the estate according to law.

of <u>January</u>, 2002.

CURRY, CIRCUIT JUDGE