2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: .

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Apr 18, 2005 08:00 AM Secretary of State

820-912-3880

Date

1. Entity Nam	MENT # 653013			Sec	cretary of State	
· ·	ESSEE AVE, STE A	lailing Address 1610 TENNESSEE ÄVE, STE A LYNN HAVEN, FL 32444		1	TMM (61s) MM/WY 31MMW 1171	NEGRIC NINCE NEGRI NEGRI NEGRICANI IL INVE
DO NOT WRITE IN THIS SPACE. 6. Name and Address of Current Registered Agent			CE	04062005 4. FEI Number 59-19738 5. Certificate of	No Chg-P	CR2E034 (10/03) Applied For Not Applicable \$8.75 Additional Fee Required
TILLMAN, JEAN F 1610 TENNESSEE AVENUE LYNN HAVEN, FL 32444			DO NOT WRITE 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 Signature, typod or printed name of registered agent and table if applicable. [NOTE Registered Agent signature required when reinstaling) DATE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution.				.00 May Be led to Fees		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	P TILLMAN, JEAN 1610 TENNESSEE AVE LYNN HAVEN, FL 32444	UQAOOO314913 Q4/19/NS-80013-012 150.00				
NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO 1	VOT W	RITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN T	HIS SP	ACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	-		indi sugetie e			
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. I hereby of indicated of the cor changed,	certify that the information supplied with this f on this report or supplemental report is true poration or the receiver or trustee empowere or on an attachment with apaddress, with a	illing does not qualify for the exe and accurate and that my signal d to execute this report as requi Il other like empowered.	mption stated in Se ture shall have the red by Chapter 607	oction 119.07(3)(i), i same legal effect a 7, Florida Statutes; a	Florida Statutés. I s if made under o and that my name	further certify that the information ath; that I am an officer or director appears in Block 10 or Block 11 if