2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

FILED Jan 27, 2005 08:00 AM Secretary of State

251,990.0031 Daytime Phone #

1. Entity Nam	MENT # 659603 AN PEMBROKE, INC.						
Principal Plac 13 NORTH S FAIRHOPE, A	ECTION ST.	Mailing Address 13 NORTH SECTION ST. FAIRHOPE, AL 36532				ETBU ETBU STEVI BURU BURU KINUBET U IBBY	
DO NOT WRITE IN THIS SPACE				01172005 4. FEI Numb 59-198		CR2E034 (10/03) Applied For Not Applicable \$8.75 Additional Fee Required	
LANGFORD, RICHARD C 160 EAST SUMMERLIN STREET STE. 202 BARTOW, FL 33830-4641				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, typed or profiled name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) DATE FILE NOWITH FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Se							
After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS				ided to Fees			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDS LANE, FLEETWOOD T. 13 N SECTION ST FAIRHOPE, AL 36532				U00000 01/27/05-	199418 80088-024 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2077			· · · .			
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NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
12. I hereby of indicated of the cor changed,	certify that the information supplied with the on this report or supplemental/report is to poration or the receiver or trustee empow or on an attachment with the address, wi	nis filing does not qualify for the exe ue and excurate and that of signal ered to execute this report as requ thalf offier like empowered.	emption stated in t ture shall have the ired by Chapter 6	Section 119.07(3) e same legal effe 07, Florida Statut	(i), Florida Statutes. I ct as if made under o es; and that my name	further certify that the information eath; that I am an officer or director appears in Block 10 or Block 11 if	