

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 666155

FILED
Jan 22, 2004
Secretary of State

Entity Name: ROC OF PUTNAM INC.

Current Principal Place of Business:

102 REID STREET
P O BOX 1037
PALATKA, FL 321788037

Current Mailing Address:

102 REID STREET
P O BOX 1037
PALATKA, FL 321788037

New Principal Place of Business:

102 REID STREET
P O BOX 1037
PALATKA, FL 321781037 US

New Mailing Address:

102 REID STREET
P O BOX 1037
PALATKA, FL 321781037 US

FEI Number: 59-2035397

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROBERTS, W W
602 CLEVELAND AVE
PALATKA, FL 321771815

Name and Address of New Registered Agent:

ROBERTS, W W
602 CLEVELAND AVE
PALATKA, FL 321771815 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: W. W. ROBERTS

01/22/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ROBERTS, W W,
Address: 602 CLEVELAND AVE
City-St-Zip: PALATKA, FL 00000,

Title: VPS () Delete
Name: ROBERTS, JOHN M
Address: 602 CLEVELAND AVE
City-St-Zip: PALATKA, FL

Title: VPT () Delete
Name: ROBERTS, TANCE E
Address: 324 AMELIA CT
City-St-Zip: ST AUGUSTINE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ROBERTS, W W,
Address: 602 CLEVELAND AVE
City-St-Zip: PALATKA,, FL 32177 US

Title: VPS (X) Change () Addition
Name: ROBERTS, JOHN M VPS
Address: 115 ELGIN ROAD
City-St-Zip: EAST PALATKA, FL 32131 US

Title: VPT (X) Change () Addition
Name: ROBERTS, TANCE E VPT
Address: 324 AMELIA CT
City-St-Zip: ST AUGUSTINE, FL 32086 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: W. W. ROBERTS

PD

01/22/2004

Electronic Signature of Signing Officer or Director

Date