


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2004 8:00 am
Secretary of State

04-23-2004 90196 009 ***150.00

DOCUMENT # F00000001525	
1. Entity Name PERRY SAWMILL CORPORATION	

Principal Place of Business 3823 OWENS ROAD YULEE, FL 32097	Mailing Address 3823 OWENS ROAD YULEE, FL 32097
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2. Principal Place of Business 581705 White Oak Road	3. Mailing Address 581705 White Oak Road
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Yulee, FL	City & State Yulee, FL
Zip 32097	Country USA
Zip 32097	Country USA

01072004 Chg-P CR2E034 (10/03)

4. FEI Number 13-4040460	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent DAVIS, WILLIAM H WHITE OAK PLANTATION 3823 OWENS ROAD YULEE, FL 32097	
7. Name and Address of New Registered Agent Name Davis, William H Street Address (P.O. Box Number is Not Acceptable) 581705 White Oak Road City Yulee FL Zip Code 32097	

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD BERGREEN, BERNARD D 111 WEST 50TH STREET NEW YORK, NY 10020 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DAVIS, WILLIAM H 1000 OSBORNE STREET ST. MARYS, GA 31558 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Davis, William H 581705 White Oak Road Yulee, FL 32097
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MOODY, NATALIE P 111 WEST 50TH STREET NEW YORK, NY 10020 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CROPPER, STEPHEN W 111 WEST 50TH STREET NEW YORK, NY 10020 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GARRETT, VICTOR 1000 OSBORNE STREET ST. MARYS, GA 31558 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Garrett, Victor 581705 White Oak Road Yulee, FL 32097
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby 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.

SIGNATURE: William H Davis **W H DAVIS** 4/23/04 904-548-1033
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #