

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000004447

FILED
Aug 03, 2004
Secretary of State

Entity Name: R & D MANUFACTURING COMPANY, INC.

Current Principal Place of Business:

434 HIGH STREET, S.W.
GAINESVILLE, GA 30501

New Principal Place of Business:

434 HIGH STREET, S.W.
GAINESVILLE, GA 30501 US

Current Mailing Address:

PO BOX 3393
GAINESVILLE, GA 30503

New Mailing Address:

P.O. BOX 3393
GAINESVILLE, GA 30503 US

FEI Number: 58-1217215

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: PETERSON, THOMAS D
Address: 2863 LOWELL ROAD
City-St-Zip: SPRINGDALE, AR

Title: VD () Delete
Name: PETERSON, TIMOTHY W
Address: 434 HIGH STREET
City-St-Zip: GAINESVILLE, GA

Title: S () Delete
Name: WALLER, EDMUND A
Address: 500 SPRING STREET, STE 103
City-St-Zip: GAINESVILLE, GA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: PETERSON, THOMAS D
Address: 2863 LOWELL ROAD
City-St-Zip: SPRINGDALE, AR 72764 US

Title: VP (X) Change () Addition
Name: PETERSON, TIMOTHY W
Address: 434 HIGH STREET
City-St-Zip: GAINESVILLE, GA 30503 US

Title: SEC (X) Change () Addition
Name: WALLER, EDMUND A
Address: 500 SPRING STREET, STE 103
City-St-Zip: GAINESVILLE, GA 30501 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: THOMAS D PETERSON

PRES

08/03/2004

Electronic Signature of Signing Officer or Director

Date