2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000002620

City-St-Zip:

FILED Mar 31, 2004 Secretary of State

| Entity Name: MYRNA E | ENGLER PHOTO RESEARCH | , INC. | |
|--|----------------------------------|---|--------------------------------------|
| Current Principal Place of Business: | | New Principal Place of Business: | |
| 5337 N. SOCRUM LOOP LAKELAND, FL 33809 | PRD., #322 | | |
| Current Mailing Address: | | New Mailing Address: | |
| 5337 N. SOCRUM LOOP LAKELAND, FL 33809 | PRD., #322 | | |
| FEI Number: 26-0034959 | FEI Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () |
| Name and Address of Current Registered Agent: | | Name and Address of New Registered Agent: | |
| FORKNER, PAUL 7207 STANFORD DRIVE LAKELAND, FL 33809 | us | | |
| The above named entity sin the State of Florida. | submits this statement for the p | ourpose of changing its registered | office or registered agent, or both, |
| SIGNATURE: | | | |
| Electronic Signature of Registered Ager | | ent | Date |
| Election Campaign Financing | g Trust Fund Contribution (). | | |
| OFFICERS AND DIRECTORS: | | ADDITIONS/CHANGE | S TO OFFICERS AND DIRECTORS |

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition ENGLER, MYRNA B ENGLER, MYRNA B Name: Name: 2000 STAGECOACH TRAIL Address: 7207 STANFORD DRIVE Address: City-St-Zip: MANHATTAN, MT 59741 City-St-Zip: LAKELAND, FL 33809 Title: VCVP () Delete Title: VCVP (X) Change () Addition FORKNER, PAUL O FORKNER, PAUL O Name: Name: Address: 2000 STAGECOACH TRAIL Address: 7207 STANFORD DRIVE MANHATTAN, MT 59741 LAKELAND, FL 33809 City-St-Zip: City-St-Zip:

Title: Title: () Delete (X) Change () Addition Name: FORKNER, PAUL Name: FORKNER, PAUL Address: 2000 STAGECOACH TRAIL Address: 7207 STANFORD DRIVE

MANHATTAN, MT 59741 City-St-Zip: LAKELAND, FL 33809

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.

VΡ SIGNATURE: PAUL FORKNER 03/31/2004