2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F84967

Entity Name: KEITH LAWSON COMPANY, INC.

FILED Jan 21, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4557 CAPITAL CIRCLE NW TALLAHASSEE, FL 32303 US

Current Mailing Address: New Mailing Address:

% KEITH O. LAWSON, SR. P. O. BOX 37309 TALLAHASSEE, FL 323157309 US

FEI Number: 59-2421595 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:

LAWSON, KEITH O
4017 CHIPOLA STREET
7 CHIPOLA STREET
8 P.O. BOX 37309
8 TALLAHASSEE, FL 32303 US
9 TALLAHASSEE, FL 323157309 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: KEITH O LAWSON 01/21/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T () Delete Title: T (X) Change () Addition Name: LAWSON, CHARLES J Name: LAWSON, CHARLES J Address: 6244 ROCKY TOP DRIVE Address: 1311 CITADEL COURT

City-St-Zip: ANTIOCH, TN 37013 Address: 1311 CITABLE COORT

Title: CEO () Delete Title: CEO (X) Change () Addition Name: LAWSON, KEITH O SR LAWSON, KEITH O SR

 Address:
 P.O. BOX 37309
 Address:
 P.O. BOX 37309

 City-St-Zip:
 TALLAHASSEE, FL 32315
 City-St-Zip:
 TALLAHASSEE, FL 323157309 US

Title: PCFO () Delete Title: PCFO (X) Change () Addition Name: LAWSON, KEITH O II Name: LAWSON, KEITH O II

 Name:
 LAWSON, RETHROTI

 Address:
 2481 LUTEN ROAD

 City-St-Zip:
 QUINCY, FL 32351

 City-St-Zip:
 QUINCY, FL 32351 US

Title: S () Delete Title: S (X) Change () Addition

 Name:
 GOODMAN, KELLY M
 Name:
 GOODMAN, KELLY M

 Address:
 4557 CAPITAL CIRCLE SW
 Address:
 P.O. BOX 37309

City-St-Zip: TALLAHASSEE, FL 32303 City-St-Zip: TALLAHASSEE, FL 323157309 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: KELLY M GOODMAN SEC 01/21/2005