2004 FOR PROFFT CORPORATION

Mar 24, 2004 08:00 AM Secretary of State **ANNUAL REPORT** DOCUMENT # F96000006628 SCHNEIDER MORTGAGE CO. Principal Place of Business Mailing Address **ROUTE 1** ROUTE 1 ELKO, GA 31025 ELKO, GA 31025 03152004 No Chg-P CB2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 58-2314249 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent NRAI SERVICES, INC. DO NOT WRITE 526 E. PARK AVENUE TALLAHASSEE, FL 32301 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) DATE **\$5.00** May Be U00000095059 03/24/04-80016-019 150.00 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution, Added to Fees After May 1, 2004 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE SCHNEIDER, BERNHARD NAME STREET ADDRESS ROUTE 1 CITY-ST-ZIP ELKO, GA 31025 TIBLE MAKE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADORESS CITY-ST-ZIP 1018NAME STREET ADDRESS CITY-ST-ZIP 73T2E NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling 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 AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

03-19-04

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