

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H34158

FILED
Apr 16, 2004
Secretary of State

Entity Name: LONE STAR RECOVERY SERVICE, INC.

Current Principal Place of Business:

10281 WALBRIDGE ST
10380 WALBRIDGE AVE.
PENSACOLA, FL 32534 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3745
PENSACOLA, FL 32516 US

New Mailing Address:

FEI Number: 59-2821845

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HILL, KEVIN B.
10281 WALBRIDGE AVE.
PENSACOLA, FL 32514

Name and Address of New Registered Agent:

HILL, KEVIN B.
10281 WALBRIDGE AVE.
PENSACOLA, FL 32534

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:

04/16/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HILL, KEVIN B PD
Address: 10281 WALBRIDGE AVE.
City-St-Zip: PENSACOLA, FL 32534 US

Title: M () Delete
Name: HILL, CHRISTINE A OFFICE
Address: 10281 WALBRIDGE AVE
City-St-Zip: PENSACOLA, FL 32534 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: KEVIN B. HILL

PD

04/16/2004

Electronic Signature of Signing Officer or Director

Date