2005 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

Apr 18, 2005 8:00 am Secretary of State DOCUMENT # H76780 1. Entity Name 04-18-2005 90277 009 ***150.00 FERGUSON-JACKSON CORPORATION Principal Place of Business Mailing Address 840 FERNDALE AVE. ROCKLEDGE FL 32955 1840 TIMBERS WEST ROCKLEDGE FL 32955 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) Applied For City & State City & State 4. FEI Number 59-2616627 Not Applicable Country Zip Country Ζìρ \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent FERGUSON, CLARENCE Street Address (P.O. Box Number is Not Acceptable) 1840 TIMBERS WEST BLVD. ROCKLEDGE FL 32955 Zip Code City 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State: OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Delete TITLE TITLE Change Addition FERGUSON, SUSIE NAME 1840 TIMBERS WEST STREET ADDRESS STREET ADDRESS **ROCKLEDGE FL 32955** CITY-ST-ZIP CITY-ST-7/P ☐ Addition Change ☐ Delete TITLE TITLE FERGUSON, CLARENCE NAME NAME 1840 TIMBERS WEST BLVD. STREET ADDRESS STREET ADDRESS ROCKLEDGE FL 32955 CITY-ST-ZIP CITY-ST-7iP **Addition** Delete DV Roderick S. Ferguson 4097 San Beluga Way Rockledge, FL 32955 Change TULE NAME JACKSON, RUTH NAME STREET ADDRESS STREET ADDRESS 621 GEORGIA AVE. CITY-ST-ZIP CITY-ST-ZIP **COCOA FL 32922** DCT Deborah E. Yarbrough 1089 Fairlawn Drive П Спапае **Addition** ■ Delete TITLE TITLE JACKSON, R.L. SR. NAME NAME STREET ADDRESS 621 GEORGIA AVE. STREET ADDRESS Rockledge, FL 32955 COCOA FL 32922 CITY-ST-7IP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing 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.

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

THLE

NAME

STREET ADDRESS CITY-ST-ZIP

☐ Delete

FILED

321-631-9450

☐ Change

☐ Addition