


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 16, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # J35275</b> 1. Entity Name MADISON MACHINE SHOP, INC.	
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Principal Place of Business 205 SE MILLINOR ST. MADISON, FL 32340	Mailing Address 205 SE MILLINOR ST. MADISON, FL 32340
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01112004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-2721085	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  THOMAS, ROY W. 205 SE MILLINOR ST. MADISON, FL 32340
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**DO NOT WRITE  
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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	P THOMAS, ROY W. ROUTE 3, BOX 118 MADISON, FL
TITLE NAME STREET ADDRESS CITY- ST- ZIP	ST THOMAS, CHERYELL E. ROUTE 3, BOX 118 MADISON, FL
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VP THOMAS, QUINCY ROUTE 3, BOX 120 MADISON, FL
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U000000006189  
01/16/04-80025-009 150.00

**DO NOT WRITE  
IN THIS SPACE**

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

SIGNATURE: Roy W Thomas 1/15/04 8509736237  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #