2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J44757

Entity Name: HOLT FILTERS, INC.

FILED Jun 30, 2004 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

1672 N HERCULES AVE 1672 N HERCULES AVE

STE F STE G

CLEARWATER, FL 33765 US CLEARWATER, FL 33765 US

Current Mailing Address: New Mailing Address:

1672 HERCULES AVE. 1672 HERCULES AVE.

STE F STE G

CLEARWATER, FL 33765 US CLEARWATER, FL 33765 US

FEI Number: 59-2744394 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:

HOLT, TIMOTHY C. 1672 N HERCULES AVE CLEARWATER, FL 33765 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:

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: HOLT, TONYIA A Name: HOLT, TONYIA A

Address: 1672 N HERCULES AVE UNIT F
City-St-Zip: CLEARWATER, FL 33765 US
Address: 1672 N HERCULES AVE UNIT G
City-St-Zip: CLEARWATER, FL 33765 US

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

Name: HOLT, TIMOTHY Name: HOLT, TIMOTHY

Address: 1672 N. HERCULES AVE UNIT F Address: 1672 N. HERCULES AVE UNIT G
City-St-Zip: CLEARWATER, FL 33765 US City-St-Zip: CLEARWATER, FL 33765 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: TIMOTHY C. HOLT PRES 06/30/2004