2005 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 22, 2005 08:00 AM Secretary of State DOCUMENT # J50208 1. Entity Name RATTLESNAKE POINT, INC. Principal Place of Business Mailing Address 5411 W. TYSON AVE. 5411 W. TYSON AVE. TAMPA, FL 33611 TAMPA, FL 33611 CR2E034 (10/03) 04192005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2764476 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent TOMION, JON DO NOT WRITE 5411 W. TYSON AVE. TAMPA, FL 33611 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 U00000324835 **\$5.00** May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution 04/22/05-80108-009 158.75 Added to Fees After May 1, 2005 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE DST TOMION, JON C. NAME 5411 W. TYSON AVE. STREET ADDRESS CITY-ST-ZIP TAMPA, FL TITLE NAME KEARNEY, JOHN (JR.) STREET ADDRESS 5411 W. TYSON AVE. TAMPA, FL CITY-ST-ZIP TITLE KEARNEY, JOHN E. NAME STREET ADDRESS 5411 W. TYSON AVE. DO NOT WRITE CITY-ST-ZIP TAMPA, FL IN THIS SPACE TITLE NAME STREET ADDRESS CATY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

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:

NAME STREET ADDRESS CITY-ST-ZIP

FILED