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Mar 31, 2005 8:00 am
Secretary of State
03-31-2005 90042 047 ***158.75

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # K14870

1. Entity Name
ACE SALVAGE, INC.

Principal Place of Business	Mailing Address
HWY. 90 MIDWAY MIDWAY, FL 32343	P.O. BOX 496 MIDWAY, FL 32343

DO NOT WRITE IN THIS SPACE

03282005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2879351
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

PASSETT, JOHN
3070 SHARER RD.
TALLAHASSEE, FL 32310

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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, 2005 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	PASSETT, JOHN
STREET ADDRESS	3077 SHARER STREET
CITY-ST-ZIP	TALLAHASSE, FL
TITLE	V
NAME	KENT, GARY
STREET ADDRESS	VILLA LANE P.O BOX 496
CITY-ST-ZIP	MIDWAY, FL
TITLE	ST
NAME	SANDY ~~PASSETT~~ Doty
STREET ADDRESS	3347 SHELINE DR
CITY-ST-ZIP	HAVANA, FL 32333
TITLE	VP
NAME	RONNIE HAMILTON
STREET ADDRESS	2349 MOON LANE
CITY-ST-ZIP	TALLAHASSEE, FL 32343
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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: Sandy Doty 3/28/05 (850) 574-1364
SIGNATURE AND TYPED OR PRINTED NAME OF EXECUTING OFFICER OR DIRECTOR — Date — Daytime Phone #