2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

Sep 09, 2004 8:00 am Secretary of State DOCUMENT # K35585 1. Entity Name 09-09-2004 90012 020 ***150.00 JUDGE BEARDEN COMPANY, INC. Principal Place of Business Mailing Address 3800 S TAMIAMI TR #311 P.O. BOX 25302 SARASOTA FL 34277 SARASOTA FL 34277 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (4/04) City & State City & State 4. FEI Number Applied For 65-0084233 Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DICKINSON, PATRICK H. Street Address (P.O. Box Number is Not Acceptable) 1750 RINGLING BLVD. SARASOTA FL 34236 Zip Code 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 FILE NOW!!! FEE IS \$550.00 S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 9. Election Campaign Financing \$5.00 May Be DUE BY September 8, 2004 late fee. By checking this box, the corporation certifies it Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State did not receive prior notice. Fee to file is \$150.00. 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PTD TITLE Delete TITLE ☐ Change ☐ Addition BEARDEN, J. WESLEY NAME STREET ADDRESS 4373 TRAILS DR STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34232 CITY-ST-ZIP SD TITLE Delete TITLE ☐ Change Addition NAME BEARDEN, BARBARA J. NAME STREET ADDRESS 6020 MIDNIGHT PASS RD 58 STREET ADDRESS SARASOTA FL CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition MARIE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE □ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ 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.

FILED

). WESLEY BEARDEN 08/11/04