


**2005 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 11, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N04662</b> 1. Entity Name LANGLEY SQUARE, INC.	
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Principal Place of Business 3000 LANGLEY AVE SUITE 200 PENSACOLA, FL 32504 US	Mailing Address 3000 LANGLEY AVE SUITE 302 PENSACOLA, FL 32504 US
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01042005 No Chg-NP CR2E037 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-2539502	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

SUMLIN, R WAYNE  
3000 LANGLEY AVENUE  
SUITE 200  
PENSACOLA, FL 32504

**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 reappointing) DATE: \_\_\_\_\_

**Filing Fee is \$61.25  
Due by May 1, 2005**

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	D FELDER, BRUCE K 3000 LANGLEY AVE PENSACOLA, FL 32504
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SIMMONS, LONNIE L 3000 LANGLEY AVE, SUITE 301 PENSACOLA, FL 32504
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SUMLIN, R WAYNE 3000 LANGLEY AVE, SUITE 200 PENSACOLA, FL 32504
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOWREY, RODGER K 3000 LANGLEY AVE #400 PENSACOLA, FL 32504
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000177393  
01/11/05-80039-002 61.25

**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 617, 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: Bruce K. Felder - Bruce K. Felder

1/5/04  
Date

850-474-0886  
Daytime Phone #