2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002389

FILED Feb 14, 2005 Secretary of State

Entity Name: HOMEBREWERS UNDERGROUND, INC.

Current Principal Place of Business: New Principal Place of Business:

205 GOVERNMENT AVE. NICEVILLE, FL 32578

Current Mailing Address: New Mailing Address:

7500 ROCK HILL RD.

PONCE DE LEON, FL 32455 US

FEI Number: 59-3318525 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:

KELTER, DONALD 7500 ROCK HILL RD

PONCE DE LEON, FL 32455 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:

Flateria Circular FD video I Arrel

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: BARROW, CLARK MR Name: NELSON, MIKE MR
Address: 117 RACETRACK RD NW #250 Address: 101 PAULA CT

City-St-Zip: FT WALTON BEACH, FL 32547 City-St-Zip: MARY ESTHER, FL 32569

 $\label{eq:title: VD (X) Change () Addition} \begin{picture} Title: & VD & (X) Change () Addition \\ \end{picture}$

 Name:
 LAWRENCE, TERRAL MR
 Name:
 BROWN, JEFF MR

 Address:
 4 JAMES PL
 Address:
 188 HUDSON DR

City-St-Zip: MARY ESTHER, FL 32569 City-St-Zip: FT WALTON BEACH, FL 32548

Title: TD () Delete Title: () Change () Addition

 Name:
 KELTER, DONALD P MR
 Name:

 Address:
 7500 ROCK HILL RD
 Address:

 City-St-Zip:
 PONCE DE LEON, FL 32455
 City-St-Zip:

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

 Name:
 NELSON, MIKE
 Name:

 Address:
 101 PAULA CT
 Address:

 City-St-Zip:
 MARY ESTHER, FL 32569
 City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONALD P KELTER MR 02/14/2005