2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

Aug 25, 2004 8:00 am Secretary of State **DOCUMENT # P00000015586** 08-25-2004 90002 007 ***150 00 NIEDERMAIER PROPERTY, INC. Principal Place of Business Mailing Address 74007/34 17941 BRANCH RD 17941 BRANCH RD HUDSON, FL 34667 HUDSON, FL 34667 05052004 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3620209 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent NIEDERMAIER, RANDAL A DO NOT WRITE 17941 BRANCH RD HUDSON, FL 34667 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 RANDA / A NIEDERMAICH ignature, typed or printed name of registered agent and title if applicable In accordance with s. 607.193(2)(b), F.S., the 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. П corporation did not receive the prior notice. Added to Fees Due by September 8, 2004 OFFICERS AND DIRECTORS 10. Р TITLE NAME NIEDERMAIER, RANDAL A STREET ADDRESS 17911 BRANCH RD CTTY-ST-7IP HUDSON FL 30567 TITLE NIEDERMAÏER, RANDA!, A NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-7IP TITLE IN THIS SPACE NAME STREET ADDRESS 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). Fiorida 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: Niedermaler Randal A

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

727-857-2200

FILED