2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2004
Secretary of State

DOCUMENT# P00000020543

Entity Name: DOFWIR, INC.

Current Principal Place of Business:

2301 PARK AVENUE
SUITE 404
ORANGE PARK, FL 32073

New Principal Place of Business:

1590 ISLAND LANE
SUITE 26
FLEMING ISLAND, FL 32003 US

Current Mailing Address:

P.O. BOX 1870
MIDDLEBURG, FL 32050

New Mailing Address:

P.O. BOX 1870
MIDDLEBURG, FL 320501870 US

FEI Number: 59-3627686 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

THOMPSON, WILLIAM L JR.
2301 PARK AVENUE
SUITE 404
ORANGE PARK, FL 32073 US

Name and Address of New Registered Agent:

THOMPSON, WILLIAM L JR.
1590 ISLAND LANE
SUITE 26
FLEMING ISLAND, FL 32003 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: _____ 01/06/2004
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DC ( ) Delete
Name: WELTY, W.R.
Address: 1863 WELLS ROAD, #69
City-St-Zip: ORANGE PARK, FL 32073

Title: ST ( ) Delete
Name: BALLANTYNE, LYNN
Address: 2085 W. FOOT HILL BLVD.
City-St-Zip: UPLAND, CA 91786

Title: PD ( ) Delete
Name: HALLQUEST, THOMAS
Address: 781 BRANSCOMB ROAD
City-St-Zip: GREEN COVE SPRINGS, FL 32043

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS HALLQUEST PD 01/06/2004
Electronic Signature of Signing Officer or Director — Date