2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 12, 2004 08:00 AM tate

| DOCUMENT # P0000005 1. Entity Name HOUGH CONSULTING, INCORPO | DRATED | | Secretary of Sta | te |
|--|---|-----------------------------------|---|--------------------|
| Principal Place of Business 10181 S.W. 67TH COURT | Mailing Address 10181 S.W. 67TH COURT | | | |
| OCALA, FL 34476 | OCALA, FL 34476 | | | |
| | | | | |
| | - | | | |
| DO NOT WRITE IN THIS CRACE | | 04072004 No Chg-P CR2E034 (10/03) | | |
| DO NOT WRITE IN THIS SPAC | | | 4. FEI Number Applied F. NOT APPLICABLE Not Applie | |
| A STATE OF THE STA | | | 5. Certificate of Status Desired | |
| 6. Name and Address of Curre | nt Registered Agent | velate - 1 m e | | -, -, - |
| HOUGH, KENNETH B | | | DO NOT WRITE | |
| OCALA, FL 34476 | | | IN THIS SPACE | , e e . |
| The above named entity submits this statement the obligations of registered agent. | t for the purpose of changing its registe | red office or register | red agent, or both, in the State of Florida. I am famillar with, and ac | cept |

| the obligations of registered agent. | | | | | |
|--------------------------------------|------|----------|--------------|---|--|
| | | | | - | |
| SIGNATURE | | <u> </u> | <u> </u> | | |
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10108848 I-BU019-014 150 00

| FIL After M | E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00 | Election Campaign Financing Trust Fund Contribution. | | 65.00 May Be added to Fees | U00000108848 U4717704-80019-0 |
|--|---|--|----------------|-------------------------------|--|
| 10. | OFFICERS AND DIRE | CTORS | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D HOUGH, KENNETH B 10181 S.W. 67TH COURT OCALA, FL 34476 | | ÷ | | - · · |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | · · · · · · · · · · · · · · · · · · · | | · | · |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | , | - | en e |

12. I hereby certify that the information supplied with this filling 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME