2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000081925

FILED Feb 21, 2004 Secretary of State

Entity Name: SIMPLY GRANITE, INC. **Current Principal Place of Business: New Principal Place of Business:** 7355 SW 38TH ST SUITE 101 OCALA, FL 34474 **New Mailing Address: Current Mailing Address:** P.O. BOX 772166 OCALA, FL 344772166 US FEI Number: 59-3667132 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: HAMMONS, PAM HAMMONS, DAVID 4039 NW BLITCHEN ROAD 4039 NW BLITCHEN ROAD OCALA, FL 34482 OCALA, FL 34482 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: DAVID HAMMONS 02/21/2004 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition HERLIHY, CASEY Name: Name: 7912 MACBELLA CT Address: Address: City-St-Zip: ORLANDO, FL 32836 City-St-Zip: Title: Title: () Change () Addition () Delete Name: HAMMONS, DAVID Name: 4039 NW BLITCHTON RD Address: Address: OCALA, FL 34482 City-St-Zip: City-St-Zip: Title: Title: VST () Delete (X) Change () Addition HAMMONS, PAMELA Name: HAMMONS, PAMELA Name: 4039 NW BLITCHTON RD 4039 NW BLITCHTON RD Address: Address: City-St-Zip: OCALA, FL 34482 City-St-Zip: OCALA, FL 34482 Title: () Delete Title: () Change (X) Addition HAMMONS, DAVID B JR Name: Name: Address: Address: 4037 BLITCHTON RD City-St-Zip: City-St-Zip: OCALA, FL 34475

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: PAM HAMMONS VT 02/21/2004