

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000113187

Entity Name: WEAR PRODUCTS, INC.

FILED
Apr 21, 2004
Secretary of State

Current Principal Place of Business:

5289 E BAY BLVD
GULF BREEZE, FL 32563

New Principal Place of Business:

Current Mailing Address:

5289 E BAY BLVD
GULF BREEZE, FL 32563

New Mailing Address:

FEI Number: 43-1911682

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALLMAN, DAVID G
5062 MANDAVILLA BLVD
GULF BREEZE, FL 32563 US

Name and Address of New Registered Agent:

HALLMAN, SUSANNE R
5062 MANDAVILLA BLVD
GULF BREEZE, FL 32563 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: SUSANNE R. HALLMAN

04/21/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES (X) Delete
Name: HALLMAN, DAVID G
Address: 5062 MANDAVILLA BLVD
City-St-Zip: GULF BREEZE, FL 32561

Title: VP () Delete
Name: HALLMAN, SUSANNE R
Address: 5062 MANDAVILLA BLVD
City-St-Zip: GULF BREEZE, FL 32561

Title: SEC/ () Delete
Name: WALLEY, CHRISTL
Address: 33 LOVEWELL LOOP
City-St-Zip: RICHTON, MS 39476

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PRES (X) Change () Addition
Name: HALLMAN, SUSANNE R
Address: 5062 MANDAVILLA BLVD
City-St-Zip: GULF BREEZE, FL 32563

Title: SEC/ (X) Change () Addition
Name: WALLEY, CHRISTL
Address: 7224 MAJESTIC BLVD
City-St-Zip: NAVARRE, FL 32567

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: SUSANNE R. HALLMAN

PRES

04/21/2004

Electronic Signature of Signing Officer or Director

Date