2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2004
Secretary of State

DOCUMENT# P01000001647

Entity Name: NORTON FOLGATE, INC.

Current Principal Place of Business:

9168 BRENDAN PRESERVE CT
BONITA SPRINGS, FL 34135

New Principal Place of Business:

8841 W TERRY ST
BONITA SPRINGS, FL 34135

Current Mailing Address:

9168 BRENDAN PRESERVE CT
BONITA SPRINGS, FL 34135

New Mailing Address:

PO BOX 1240
BONITA SPRINGS, FL 34133

FEI Number: 59-3690170 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BARTLETT, SIMON
8167 RIVER HOMES LANE
#304
BONITA SPRINGS, FL 34135 US

Name and Address of New Registered Agent:

BARTLETT, SIMON
PO BOX 1240
BONITA SPRINGS, FL 34133 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: SIMON BARTLETT 04/13/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: VPS ( ) Delete
Name: ADKINS, TERRY
Address: 5192 WEST BLVD
City-St-Zip: NAPLES, FL 34103

Title: VP ( ) Delete
Name: PITHER, ALAN
Address: SUMMERWINDS 6 PRIESTS PADDOCK
City-St-Zip: BEACONSVILLE,BUCKINGHAMSHIRE, HP9 1YL UK

Title: P ( ) Delete
Name: BARTLETT, SIMON
Address: 8617 RIVER HOMES LANE #304
City-St-Zip: BONITA SPRINGS, FL 34135

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: SIMON BARTLETT P 04/13/2004
Electronic Signature of Signing Officer or Director Date