2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Apr 28, 2005 8:00 am Secretary of State DOCUMENT # P01000024756 04-28-2005 90169 018 ***150.00 SPIRIT BUILDING COMPANY, INC. Principal Place of Business Mailing Address 14003533 12321 FOLGER ST 12321 FOLGER ST SPRING HILL, FL 34609 SPRING HILL, FL 34609 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02272005 CR2E034 (10/03) Chg-P City & State City & State 4. FEI Number Applied For 59-3704326 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BARNIER, STEPHEN P 12321 FOLGER ST Street Address (P.O. Box Number is Not Acceptable) SPRING HILL, FL 34609 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE Addition ☐ Change BARNIER, STEPHEN P NAME NAME STREET ADDRESS 12321 FOLGER ST STREET ADDRESS CITY-ST-ZIP SPRING HILL, FL 34609 CITY-ST-ZIP TITI F ☐ Delete Change ☐ Addition NAME BARNIER, CHERYL A NAME STREET ADDRESS 12321 FOLGER ST STREET ADDRESS CITY-ST-7IP SPRING HILL, FL 34609 CITY-ST-ZIP TITLE ☐ Detete TITI F ☐ Change ☐ Addition BARNIER, STEPHEN P JR NAME NAME STREET ADDRESS 12321 FOLGER ST STREET ADDRESS CITY-ST-ZIP SPRING HILL, FL 34609 CITY-ST-ZIP TITLE ☐ Detete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Detete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Detete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing 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 poort 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. 4-25-05

FILED

Daytime Phone #