2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000091155

Entity Name: UNDERWOOD BROTHERS INCORPORATED

FILED May 01, 2004 Secretary of State

Current Principal Place of Business:			New Principal Pl	New Principal Place of Business:	
2450-7 SOUTH ROAD 16 SAINT AUGUSTINE, FL 32092			2700 STATE ROAD 16 SUITE 206 SAINT AUGUSTINE, FL 32092		
Current M	lailing Addre	ss:	New Mailing Add	New Mailing Address:	
2450-7 SOUTH ROAD 16 SAINT AUGUSTINE, FL 32092			2700 STATE ROAD 16 SUITE 206 SAINT AUGUSTINE, FL 32092		
FEI Number	: 59-3744335	FEI Number Applied For()	FEI Number Not Applicable () Certificate of Status Desired ()	
Name and	d Address of	Current Registered Agent:	Name and Addre	Name and Address of New Registered Agent:	
1840 SW 2 4TH FLOO MIAMI, FL	OR 33145 US named entity		purpose of changing its regis	tered office or registered agent, or both,	
SIGNATU	e of Florida. ⊳⊏·				
Electronic Signature of Registered Agent			gent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICER	S AND DIREC	CTORS:	ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	UNDERWOOD 1609 BAY HAV		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	UNDERWOOD 1609 BAY HAV) Delete I, CHARLES P JR VK LANE TINE, FL 32084	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	UNDERWOOD 179 MAYA CT.) Delete , CHARLES P SR TINE, FL 32086	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	D () Delete	Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: STEVE T. UNDERWOOD PSD 05/01/2004

UNDERWOOD, PATRICIA J

SAINT AUGUSTINE, FL 32086

179 MAYA CT.

Name: Address:

City-St-Zip: