2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2004
Secretary of State

DOCUMENT# P01000108653

Entity Name: DIRECT DISTRIBUTING, INC.

Current Principal Place of Business:

1050 REFLECTIONS LAKE LOOP
LAKELAND, FL 33813

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 7235
LAKELAND, FL 338077235

New Mailing Address:

FEI Number: 59-3754689 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WEAVER, SANDRA D
1050 REFLECTIONS LAKE LOOP
LAKELAND, FL 33813

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: WEAVER, SANDRA D
Address: 1050 REFLECTIONS LAKE LOOP
City-St-Zip: LAKELAND, FL 33813

Title: DV ( ) Delete
Name: MCGEE, MARGARET M
Address: 2023 COMPANERO AVENUE
City-St-Zip: ORLANDO, FL 32804

Title: DT ( ) Delete
Name: WEAVER, PAUL R
Address: 1050 REFLECTIONS LAKE LOOP
City-St-Zip: LAKELAND, FL 33813

Title: DS ( ) Delete
Name: MCGEE, TED L
Address: 2023 COMPANERO AVENUE
City-St-Zip: ORLANDO, FL 32804

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:

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: PAUL R. WEAVER TRES 01/22/2004

Electronic Signature of Signing Officer or Director — Date