2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004
Secretary of State

DOCUMENT# P01000113054

Entity Name: MAGNOLIA ACRES & TRAINING CENTER, INC.

Current Principal Place of Business:

695 SE 165TH STREET
SUMERFIELD, FL 34491

New Principal Place of Business:

695 SE 160TH STREET
SUMMERFIELD, FL 34491

Current Mailing Address:

695 SE 165TH STREET
SUMERFIELD, FL 34491

New Mailing Address:

695 SE 160TH STREET
SUMMERFIELD, FL 34491

FEI Number: 59-3759117 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIAMS, JAMES A
695 S.E. 160TH STREET
SUMMERFIELD, FL 34491 US

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: P ( ) Delete
Name: WILLIAMS, JAMES A
Address: 695 S.E. 160TH STREET
City-St-Zip: SUMERFIELD, FL 34491

Title: V ( ) Delete
Name: WILLIAMS, MARJORIE A
Address: 695 S.E. 160TH STREET
City-St-Zip: SUMERFIELD, FL 34491

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: WILLIAMS, JAMES A
Address: 695 S.E. 160TH STREET
City-St-Zip: SUMMERFIELD, FL 34491

Title: V (X) Change ( ) Addition
Name: WILLIAMS, MARJORIE A
Address: 695 S.E. 160TH STREET
City-St-Zip: SUMMERFIELD, FL 34491

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: JAMES A. WILLIAMS P 04/29/2004

Electronic Signature of Signing Officer or Director — Date