2004 FOR PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # P0200003461



FILED Mar 19, 2004 8:00 am Secretary of State

| 1. Entity Name FERRELL INDUSTRIES, INC. | | | | 03-19-2004 90056 039 ***150.00 | | | | 50.00 |
|--|--|---|-----------------------|---|--|-------------------------------|-------------------------------------|-------------------------------------|
| Principal Place of Business | Mailing Address | | | | | V | · | ~ |
| 432 HERRON RD N FORT MYERS, FL 33903 | C/O ROBERT D ROYST P O DRAWER 60205 FT MYERS, FL 33906 | | | 1 1 1 1 31 8 1 3 711 1 1 | III 2 110 14 0 0 0 14 0 0 0 17 1 0 0 0 1 | 16 11 16 | | |
| 2. Principal Place of Business | 3. Mailing Address | lailing Address | | | | | | |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | <u>'</u> | | 02172004 | Chg-P | CR2E0 | 34 (10/03) | |
| City & State | City & State | City & State | | 4. FEI Number 30-0033 | 290 | | | oplied For ot Applicable |
| Zip Country | Zip | Country | | 5. Certificate of | Status Desired | | \$8.75 Add Fee Require | |
| 6. Name and Address of Curre | nt Registered Agent | | | 7. Name and A | ddress of New R | egistered / | Agent | |
| ROYSTON, ROBERT D JR | | Name | | ,, | | | | |
| 12670 NEW BRITTANY BLVD, SUITE FT MYERS, FL 33907 | 101 | Street Address | | O. Box Number | is Not Acceptable | ;) | | |
| | | City | | | | FL | Zip Cod | e |
| The above named entity submits this statement the obligations of registered agent. | t for the purpose of changing it | s registered office or r | registere | ed agent, or both | in the State of Flo | | | and accept |
| SIGNATURE Signature, typed or printed name of registered ag | ent and little if ennlicable (NC | TE: Registered Agent signature | e required y | when reinstating) | | DATE | | |
| organical appeal of printed frame of registered ag | ent and the ir appreciable. (Inc | TE. Registered Agont signature | 0.1040 | ······································ | | | | 1 |
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indicated on this report or supplemental report 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.

G fewel SIGNATURE AND TYPED OR PRINTED NAME OF SCHING OFFICER OR DIRECTOR