2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 15, 2004
Secretary of State

DOCUMENT# P02000004790

Entity Name: LOW & LOW TRANSPORT & DELIVERY, INC.

Current Principal Place of Business:

6250 82ND AVE N.
PINELLAS PARK, FL 33781

New Principal Place of Business:

13555 49TH ST. N.
CLEARWATER, FL 33762 US

Current Mailing Address:

6250 82ND AVE N.
PINELLAS PARK, FL 33781

New Mailing Address:

13555 49TH ST. N.
CLEARWATER, FL 33762 US

FEI Number: 36-4488837 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GILCHRIST, GAIL D
3320-A 122ND AVE N.
ST PETERSBURG, FL 33716 US

Name and Address of New Registered Agent:

GILCHRIST, GAIL D
11 42ND ST. N.
ST PETERSBURG, FL 33713 US

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: GAIL GILCHRIST 06/15/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: LOW, KEVIN M
Address: 6250 82ND AVE N.
City-St-Zip: PINELLAS PARK, FL 33781

Title: ST ( ) Delete
Name: LOW, NOLAN M
Address: 1251 69TH ST N.
City-St-Zip: ST PETERSBURG, FL 33710

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: LOW, KEVIN M
Address: 13555 49TH ST. N.
City-St-Zip: CLEARWATER, FL 33762 US

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: NOLAN M. LOW ST 06/15/2004
Electronic Signature of Signing Officer or Director Date