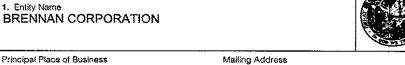
2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000023968

1. Entity Name

6635 WILLOW PARK DRIVE NAPLES, FL 34109

BRENNAN CORPORATION



DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6635 WILLOW PARK DRIVE NAPLES, FL 34109

FILED Jan 28, 2004 08:00 AM Secretary of State



01142004

No Chg-P

CR2E034 (10/03)

4. FEI Number 30-0110357

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Daytimo Phone #

6. Name and Address of Current Registered Agent

STARLIN, HEYWARD B 10090 VALIANT CT #201 FORT MYERS, FL 33913

SIGNATURE:

DO NOT WRITE IN THIS SPACE

| 8. 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. I am familiar with, and accept the obligations of registered agent. | | | | | |
|---|---|---|---------------|--------------------------------|---|
| SIGNATURE Signature, typod or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when relastating) DATE | | | | | |
| FILE NOW!!! FEE 15 \$150.00 After May 1, 2004 Fee will be \$550.00 | | 9. Election Campaign Financing \$5.00 May 8e Trust Fund Contribution. Added to Fees | | \$5.00 May Be Added to Fees | |
| 10. | OFFICERS AND DIREC | CTORS | | | |
| TITLE NAME STREET ADDRESS GITY-ST-ZIP | T DIAMOND, DAVID B 9129 THE LANE NAPLES, FL 34109 | | | | U00000018888 01/29/04-80003-006 158.75 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VSD DEANGELIS, JOHN M 2316 HARRIER RUN NAPLES, FL 31405 | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P STARLING, HEYWARD B 10090 VALIANT CT #201 FORT MYERS, FL 33913 | DO NOT WRI | | | NOT WRITE |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | IN THIS SPACE | | |
| TITLE NAME STREET ADDRESS CRY-ST-ZIP | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | |
| 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f). Florida Statutes. I further certify that the information 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 | | | | | |