2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004
Secretary of State

DOCUMENT# P02000032268

Entity Name: ROAD SOLUTIONS, INC.

Current Principal Place of Business:

501 ST. JOHNS AVENUE
PALATKA, FL 32177

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 2138
PALATKA, FL 32178

New Mailing Address:

FEI Number: 04-3644844 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CLARK, RONALD E ESQ.
501 ST. JOHNS AVENUE
PALATKA, FL 32177

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: PD ( ) Delete
Name: BRIGHT, STEVEN D
Address: 128 S. ROBESON STREET
City-St-Zip: ROBESONIA, PA 19551

Title: V ( ) Delete
Name: DEMARTINO, JOHN M
Address: 341 FANCY HILL ROAD
City-St-Zip: BOYERTOWN, PA 19512

Title: V ( ) Delete
Name: DONALD, THOMAS D
Address: POST OFFICE BOX 127
City-St-Zip: MIDDLEPORT, PA 18953

Title: T ( ) Delete
Name: WAGNER, PHILIP D
Address: 4 FOREST COURT
City-St-Zip: READING, PA 19606

Title: S ( ) Delete
Name: POLAK, MICHAEL L
Address: POST OFFICE BOX 180
City-St-Zip: FRIEDENSBURG, PA 17933

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: BRIGHT, STEVEN D
Address: 145 STEEPLE DRIVE
City-St-Zip: ROBESONIA, PA 19551

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: STEVEN D. BRIGHT PD 04/30/2004

Electronic Signature of Signing Officer or Director — Date