2007 FOR OFIT CORPORATION

Apr 19, 2007 8:00 am Secretary of State **ANNUAL REPORT DOCUMENT # P02000046292** 04-19-2007 90188 039 ***150.00 FARMER & COMPANY, INC. Mailing Address Principal Place of Business 40000-1724 33RD STREET P.O. BOX 141241 ORLANDO, FL 32814 **STE 200** ORLANDO, FL 32839 04132007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 03-0438051 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FARMER, DANIEL H DO NOT WRITE 903 FERN AVE ORLANDO, FL 32814 IN THIS SPACE the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept 8. The above named entity submits this s the obligations of registered agent SIGNATURE Signature, Typed or printed na egistered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE:13:\$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE DPST NAME FARMER, DANIEL H 903 FERN AVE STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32814 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP

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Daytime Phone #

12. I hereby certify that the information supplied with this fling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is free 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 embowered 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. SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

NAME STREET ADDRESS