2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000059428 JERICO HOLDINGS, INC. 04 FEB 23 AM 8:00 Principal Place of Business Mailing Address **806A THIRD STREET 806A THIRD STREET** NEPTUNE BEACH, FL 32266 NEPTUNE BEACH, FL. 32266 CR2E034 (10/03) 01072004 No Cha-P DO NOT WRITE IN THIS SPACE 4. FEI Number 54-2066967 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent AHERN, FRED L JR. DO NOT WRITE 2215 SOUTH THIRD STREET 101 IN THIS SPACE JACKSONVILLE BEACH, FL 32250 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstaling) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE P JARRETT, STEVE 806A THIRD STREET STREET ADDRESS 300029806363 03/03/04--01038--009 **150.00 CITY-ST-ZIP NEPTUNE BEACH, FL 32266 TITLE JARRETT, ROBIN NAME STREET ADDRESS 806A THIRD STREET NEPTUNE BEACH, FL 32266 CITY-ST-ZIP TIT: F NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-7P TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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. SIGNATURE: RINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daylore Phone #