## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000097618

FILED Apr 30, 2004 Secretary of State

Entity Name: ACCURATE FIBERGLASS TECHNOLOGY CORPORATION

**Current Principal Place of Business: New Principal Place of Business:** 220 DALE STREET EDGEWATER, FL 32132 EDGEWATER, FL 32132 **Current Mailing Address: New Mailing Address:** 220 DALE STREET P.O. BOX 599 OAK HILL, FL 32759 EDGEWATER, FL 32132 **FEI Number:** FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SPROLES, BILLY W SPROLES, BILLY W 220 DALE STREET 215 MAPLÉ STREET EDGEWATER, FL 32132 OAK HILL, FL 32759 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: 04/30/2004 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition SPROLES, BILLY W Name: Name: 220 DALE STREET Address: Address: City-St-Zip: EDGEWATER, FL 32132 City-St-Zip: Title: () Delete Title: () Change () Addition Name: ERRECALDE, GEORGE A Name: 220 DALE STREET Address: Address: EDGEWATER, FL 32132 City-St-Zip: 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 Statutés. 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: BILLY W. SPROLES 04/30/2004 D