2005 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # €02000103925 09-09-2005 90031 020 ***158.75 PENINSULAR PROPERTY GROUP, INC. Mailing Address 3Z 23 Fox Chare C 656 CRYSTAL DRIVE N 108 656 CRYSTAL DRIVE 50066031 PALM HARBOR, FL 34683 PALM HARBOR, FL 34683 Palm Harbor, FL 34683 06202005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 71-0907188 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SUTTON, REBECCAL Sutton, John 3223 Fox Ches Cir North #108 DO NOT WRITE 656 CRYS DAL ORIVE PALMHARBOR, FL 34683 IN THIS SPACE Polm Hardor, FL 34683 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 FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 7, 2005 10. OFFICERS AND DIRECTORS TITLE SUTTON: REBECCA L NAME STREET ADDRESS 656 CRYSTAL DRIVE PALM HARBOR, FL 34683 CITY-ST-ZIP VP SUTTON, JOHN F JR. NAME 656 CRYSTAL DRIVE STREET ADDRESS PALM HARBOR, FL 34683 Palm Harbor, PZ 34683 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-7IP IN THIS SPACE TITLE NAME STREET ADDRESS City-St-7iP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filling 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 attacturent withyan address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

L & STATE TO TO AN TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN F Sutton Jr 9/2/05 727 687 1494

FILED

Sep 09, 2005 8:00 am