2005 FOR PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP

SIGNATURE:

Apr 30, 2005 08:00 AM Secretary of State **DOCUMENT # P03000028434** 1. Entity Name DOUGLASS & SON, INC. Mailing Address Principal Place of Business 510 SW BRODERICK DR 510 SW BRODERICK DR LAKE CITY, FL 32025 LAKE CITY, FL 32025 CR2E034 (10/03) 04062005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 56-2327115 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE DOUGLASS, RODNEY 510 SW BRODERICK DR LAKE CITY, FL 32025 IN THIS SPACE tity submits this statement for the pursose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 \Box Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE DOUGLASS, RODNEY NAME STREET ADDRESS 510 SW BRODERICK DR CITY-ST-ZIP LAKE CITY, FL 32025 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAMÉ STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. Thereby 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 in changed, or on an attachment with an address, with all other JKQ empowered.

FILED