2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000028592

Entity Name: WARD DUMP TRUCKING INC.

FILED Jul 01, 2004 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

53 KATHERINE RD 4991 NATURE DR.

JACKSONVILLE, FL 32218 KEYSTONE HEIGHTS, FL 32656

Current Mailing Address: New Mailing Address:

53 KATHERINE RD 4991 NATURE DR.

KEYSTONE HEIGHTS, FL 32656 JACKSONVILLE, FL 32218

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:

WARD, WILLIAM E IV WARD, WILLIAM E IV 53 KATHERINE RD 4991 NATURE DR.

JACKSONVILLE, FL 32218 KEYSTONE HEIGHTS, FL 32656

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: 07/01/2004

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

() Delete Title: PTSD (X) Change () Addition

Title: PTSD WARD, WILLIAM E IV Name: Name: WARD, WILLIAM E IV 53 KATHERINE RD 4991 NATURE DR. Address: Address:

City-St-Zip: JACKSONVILLE, FL 32218 City-St-Zip: KEYSTONE HEIGHTS, FL 32218

Title: Title: () Delete (X) Change () Addition WARD, AMY Name: WARD, AMY Name:

53 KATHERINE RD Address: 4991 NATURE DR. Address:

JACKSONVILLE, FL 32218 KEYSTONE HEIGHTS, FL 32656 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 Statutes. 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: WILLIAM E WARD IV 07/01/2004 MR