2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Jan 28, 2005 08:00 AN DOCUMENT # P03000048262 **Secretary of State** TREASURED PLAQUES, INC. Principal Place of Business Mailing Address 338-F PAROUE DRIVE 712 TROPICAL PARKWAY ORMOND BEACH, FL 32174 ORANGE PARK, FL 32073 01192005 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 56-2352386 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CROSBY, RICHARD F DO NOT WRITE 712 TROPICAL PARKWAY ORANGE PARK, FL. 32073 IN THIS SPACE 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. (NC/TE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. 01/28/05-80074-008 150,00 TITLE CROSBY, RICHARD F HAME STREET ADDRESS 712 TROPICAL PKWY CITY-ST-7P ORANGE PARK, FL 32073 TITLE CROSBY, ELDENE M NAME STREET ADDRESS 712 TROPICAL PKWY CITY-ST-ZIP ORANGE PARK, FL 32073 NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE HAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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 addgess, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

RICHARD F. CRUSO achaidt lister NATURE AND TYPED OR PROVED NAME OF SIGNING OFFICER OR DISECTOR

25 JAN 2015