2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Secretary of State **DOCUMENT # P03000081268** 04-26-2004 91290 049 ***150.00 MCCAMMON, MAYO & MARSHALL, INC. Mailing Address Principal Place of Business 2108 BUCKMINSTER CIRCLE 2108 BUCKMINSTER CIRCLE 66423480 ORLANDO, FL 32803 ORLANDO, FL 32803 2. Principal Place of Business 3. Mailing Address . Suite, Apt. #, etc. Suite, Apt. #, etc. 04202004 CR2E034 (10/03) Applied For City & State City & State 4. FEI Number 20-0136666 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired . . 7. Name and Address of New Registered Agent 8. Name and Address of Current Registered Agent MARHSALL: MALVIN HURST Street Address (P.O. Box Number is Not Acceptable) 2108 BUCKMINSTER CIRCLE ORLANDO, FL 32803 Zip Code 8. The above named entity submits this statement for the purpose ochhanging 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 (NOTE: Registered Agent signature required when retretating) Signature, typed or printed name of registered agent and title if applicable. \$5.00 May Be 9. Election Campaign Financing FILE NOW!! FEE IS \$150.00 or May 1, 2004 Fee will be \$550.00 5. Jiế \Box Trust Fund Contribution. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. ☐ Change ☐ Delete TITLE TITLE NAME MCCAMMON, ASHLEY NAME 1315 GUNNISON AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZP ORLANDO, FL. 32804 CITY-ST-ZIP ☐ Addition ☐ Change πι€ Delete MARSHALL, MALVIN HURST JR. NAME NAME 2108 BUCKMINSTER CIRCLE STREET ADDRESS STREET ACCRESS ORLANDO, FL 32803 CITY-ST-ZP CITY-ST-ZP ☐ Change ■ Addition TITLE TITLE ☐ Delete MALAF STREET ADDRESS STREET ADDRESS CITY-ST-ZIP--CITY-ST-7/P-Addition ☐ Change ☐ Delete TITLE MLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Detete TITLE Change ☐ Addition TITLE HAME MASIF STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition Defete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CTY-ST-ZP 007Y-57-7/P 12. I hereby certify that the information supprised 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 trusted 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 all other like empowered.

FILED May 24, 2004 8:00 am

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OR PRINTED NAME OF SIGNAND OFFICER OR DIRECTOR