2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE

Apr 12, 2005 08:00 AM Secretary of State DOCUMENT # P03000107249 H. A. STOKES COMPANY, INC. Principal Place of Business Mailing Address P.O. BOX 443 P.O. BOX 443 HILLIARD, FL 32046 HILLIARD, FL 32046 03302005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0255219 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent STOKES, HERBERT_A III DO NOT WRITE H A STOKES PRIVATE DR HILLIARD, FL 32046 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 FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME. STOKES, HERBERT A III H A STOKES PRIVATE DR STREET ADDRESS CITY-ST-ZIP HILLIARD, FL 32046 TITLE U00000300074 NAME 04/12/05-80006-005 150.00 STREET ADDRESS CITY-ST-ZIP TILL NAME STREET ADDRESS DO NOT WRITE CMY-ST-7IP TIFLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP MUE NAME STREET ADDRESS CITY-ST-7/P mie NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this fitting does not qualify for the exemption stated in Section 119.07(3Xn), 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 logal 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 address, with all other like empowered.

FILED