2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000112197

Entity Name: SARASOTA MOSAICS, INC.

FILED Sep 30, 2004 Secretary of State

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

105 VAN DYCK DRIVE 1791 PALM VIEW RD. NOKOMIS, FL 34275 SARASOTA, FL 34240

Current Mailing Address: New Mailing Address:

 105 VAN DYCK DRIVE
 1791 PALM VIEW RD.

 NOKOMIS, FL 34275
 SARASOTA, FL 34240

FEI Number: 16-1687794 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WOOD, JAMES B IV

105 VAN DYCK DRIVE

NOKOMIS, FL 34275 US

WOOD, JAMES B IV

1791 PALM VIEW RD.

SARASOTA, FL 34240 US

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: JAMES B. WOOD IV 09/30/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

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OFFICERS AND DIRECTORS:

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WOOD, JAMES B IV

105 VAN DYCK DRIVE

NOKOMIS, FL 34275

WOOD, JAMES B III

1720 CHEYENNE ST.

WOOD, JAMES B IV

105 VAN DYCK DRIVE

NOKOMIS, FL 34275

WOOD, JAMES B IV

105 VAN DYCK DRIVE

NOKOMIS, FL 34275

SARASOTA, FL 34231

Title:

Title:

Name:

Title:

Title:

Name: Address:

Name:

Address:

City-St-Zip:

City-St-Zip:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition

Name: WOOD, JAMES B IV Address: 1791 PALM VIEW RD. City-St-Zip: SARASOTA, FL 34240

Title: VP (X) Change () Addition

Name: WOOD, JAMES B IV Address: 1791 PALM VIEW RD. City-St-Zip: SARASOTA, FL 34240

Title: S (X) Change () Addition

 Name:
 WOOD, JAMES B IV

 Address:
 1791 PALM VIEW RD.

 City-St-Zip:
 SARASOTA, FL 34240

Title: T (X) Change () Addition

Name: WOOD, JAMES B IV Address: 1791 PALM VIEW RD. City-St-Zip: SARASOTA, FL 34240

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: JAMES B. WOOD IV P 09/30/2004