2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 13, 2005 08:00 AM Secretary of State **DOCUMENT # P03000127838** 1. Entity Name TROY A, LOGAN INC. Principal Place of Business Mailing Address 2807 PINNACLE PT. DR. 2807 PINNACLE PT. DR. CRESTVIEW, FL 32539 CRESTVIEW, FL 32539 CR2E034 (10/03) 02182005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number Not Applicable 20-0324107 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LOGAN, LINDA A DO NOT WRITE 2807 PINNACLE PT. DR. CRESTVIEW, FL 32539 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. (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. PD TITLE LOGAN, TROY A NAME STREET ADDRESS 2807 PINNACLE POINT DR. CRESTVIEW, FL 32539 CITY-ST-ZIP U00000301341 TITLE STD 04/13/05-80028-008 150.00 LOGAN, LINDA NAME STREET ADDRESS 2807 PINNACLE POINT DR. CITY-ST-7IP CRESTVIEW, FL 32539 TITLE NAME STREET ADDRESS DO NOT WRITE C/TY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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 address, with all other like empowered.

PRINTED NAME OF SIGNING OFFICER OR DIRECT

SIGNATURE: -

FILED