2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2004
Secretary of State

DOCUMENT# P03000129575

Entity Name: SPADONI BUILDERS, INC.

Current Principal Place of Business:

5813 GOVERNMENT DRIVE
GULF BREEZE, FL 32563

New Principal Place of Business:

5422 MAVRICK LN
GULF BREEZE, FL 32563

Current Mailing Address:

5813 GOVERNMENT DRIVE
GULF BREEZE, FL 32563

New Mailing Address:

5422 MAVRICK LN
GULF BREEZE, FL 32563

FEI Number: 76-1687838 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SPADONI, ALBERT
5813 GOVERNMENT DRIVE
GULF BREEZE, FL 32563

Name and Address of New Registered Agent:

SPADONI, ALBERT
5422 MAVRICK LN
GULF BREEZE, FL 32563

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: _____ 05/01/2004
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: SD ( ) Delete
Name: SPADONI, ALBERT
Address: 5813 GOVERNMENT DRIVE
City-St-Zip: GULF BREEZE, FL 32563

Title: D ( ) Delete
Name: JOHNS, MICHAEL
Address: 6006 CAPITOL DRIVE
City-St-Zip: GULF BREEZE, FL 32563

Title: D ( ) Delete
Name: JOHNSON, EARL
Address: 6006 CAPITOL DRIVE
City-St-Zip: GULF BREEZE, FL 32563

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change ( ) Addition
Name: SPADONI, ALBERT
Address: 5422 MAVRICK LN
City-St-Zip: GULF BREEZE, FL 32563

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: ALBERT SPADONI SD 05/01/2004
Electronic Signature of Signing Officer or Director — Date