2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: 7

Jul 22, 2004 8:00 am Secretary of State DOCUMENT # P03000135801 07-22-2004 90006 047 ***550 00 NOWELL CONSTRUCTION OF NORTHWEST FLORIDA, Principal Place of Business Mailing Address **6333 LITTLE DIRT ROAD** 6333 LITTLE DIRT ROAD 44049354 PANAMA CITY, FL 32404 PANAMA CITY, FL 32404 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07212004 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 20-0721794 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent NOWELL, V.J.III --Street Address (P.O. Box Number is Not Acceptable) 125 CANDLEWICK CIRCLE PANAMA CITY, FL 32405 K was 6 1)24 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) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. 11 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE President ☐ Change Addition V.J. Nowell, NAME NAME STREET ADDRESS STREET ADDRESS 6333 C7#16 D7 CITY-ST-ZIP CITY-ST-7IP TITLE TITLE ☐ Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP -TITLE --- 🔲 Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS 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.

FILED