2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000140762

FILED May 10, 2004 Secretary of State

Entity Name: GALLON CREATIVE CONCRETE BY BENJAMIN GALLON, INC.

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

17309 LYNETTE DRIVE 31545 SADDLE LANE LUTZ, FL 33549 ZEPHRYHILLS, FL 33543

Current Mailing Address: New Mailing Address:

17309 LYNETTE DRIVE 31545 SADDLE LANE LUTZ, FL 33549 ZEPHRYHILLS, FL 33543

FEI Number: 20-0423868 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:

GALLON, SHANNON
17309 LYNETTE DRIVE
LUTZ, FL 33549

GALLON, SHANNON
31545 SADDLE LANE
ZEPHRYHILLS, FL 33543

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: SHANNON GALLON 05/10/2004

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition GALLON, BENJAMIN A GALLON, BENJAMIN A Name: Name: 17309 LYNETTE DRIVE 31545 SADDLE LANE Address: Address: City-St-Zip: LUTZ, FL 33549 City-St-Zip: ZEPHYRHILLS, FL 33543

Title: VT () Delete Title: VT (X) Change () Addition

 Name:
 GALLON, SHANNON
 Name:
 GALLON, SHANNON

 Address:
 17309 LYNETTE DRIVE
 Address:
 31545 SADDLE LANE

 City-St-Zip:
 LUTZ, FL 33549
 City-St-Zip:
 ZEPHYHILLS, FL 33543

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: SHANNON GALLON VT 05/10/2004