2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000146843

Entity Name: MONTICELLO ADVENTURES, INC.

Apr 23, 2004 Secretary of State

| Current Principal Place of Business: New P | rincipal Place of Business: |
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|--|-----------------------------|

1604 STOCKTON STREET JACKSONVILLE, FL 32204

Current Mailing Address: New Mailing Address:

1604 STOCKTON STREET JACKSONVILLE, FL 32204

FEI Number: 20-0458387 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ROBISON, MARY A ROBERTS, WILLIAM R ONE INDÉPENDENT DRIVE 1604 STOCKTON STREET **SUITE 2600** JACKSONVILLE, FL 32204 JACKSONVILLE, FL 32202 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: WILLIAM R. ROBERTS 04/23/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

JACKSONVILLE, FL 32204

OFFICERS AND DIRECTORS:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

JACKSONVILLE, FL 32204

US

Title: () Delete Title: (X) Change () Addition DEAN, HENRY E III Name: Name: DEAN, HENRY E III 1604 STOCKTON STREET 1604 STOCKTON STREET Address: Address:

City-St-Zip: JACKSONVILLE, FL 32204 City-St-Zip: JACKSONVILLE, FL 32204

Title: Title: () Delete () Change () Addition Name: DEAN, THOMAS S Name:

1604 STOCKTON STREET Address: Address: JACKSONVILLE, FL 32204 City-St-Zip: City-St-Zip:

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

ROBERTS, WILLIAM R ROBERTS, WILLIAM R Name: Name: 1604 STOCKTON STREET 4275 GENOA Address: Address:

City-St-Zip: JACKSONVILLE, FL 32204 City-St-Zip: JACKSONVILLE, FL 32210

Title: () Delete Title: DP (X) Change () Addition CROUSE, SUSAN E CROUSE, SUSAN E Name: Name:

Address: 1604 STOCKTON STREET Address: 1604 STOCKTON STREET

City-St-Zip: JACKSONVILLE, FL 32204 City-St-Zip: JACKSONVILLE, FL 32204

Title: Title: (X) Change () Addition () Delete WHITAKER, BRIAN K Name: Name: WHITAKER, BRIAN K 1604 STOCKTON STREET Address: 1604 STOCKTON STREET Address:

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.

City-St-Zip:

SIGNATURE: WILLIAM R. ROBERTS D 04/23/2004