2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

Secretary of State 02-04-2004 90069 037 ***150.00 DOCUMENT # P03000157492 1. Entity Name AVANT-YARDE, INC. Mailing Address Principal Place of Business 3078 KINGS LAKE BLVD 3078 KINGS LAKE BLVD 24007614 NAPLES, FL 34112 NAPLES, FL 34112 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01262004 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number 56-2425976 Applied For Not Applicable Zip Country 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 CHILDS, DONALD G Street Address (P.O. Box Number is Not Acceptable) **SCUDER! & CHILDS** 983 N COLLIER BLVD MARCO ISLAND, FL 34145 City Zip Code FΙ 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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Delete President, Tresuary, Secretary Change TITLE TITLE NAME NAME Larry E. Sisco STREET ADDRESS STREET ADDRESS 3078 Kings Lake Blvd. Naples, FL 34112 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition TITI F Vice President NAME NAME Kristopher Sisco STREET ADDRESS STREET ADDRESS 3078 Kings Lake Blvd. Naples. FL 34112 CITY-ST-ZIP CITY-ST-ZIP Change Addition Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 occurate 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 apprecia, with an other like empowered. LARRY C- 51560 PRE

FILED Feb 04, 2004 8:00 am

Daytime Phone #