2004 FOR PROFIT CORPORATION

May 03, 2004 8:00 am Secretary of State ANNUAL REPORT DOCUMENT # P0400001478 05-03-2004 90750 037 ***158 75 GREAT DANE CONSTRUCTION OF F.W.B.,, INC. Principal Place of Business Mailing Address 406 BEAR RD. 406 BEAR RD. FT. WALTON BEACH, FL 32547 FT. WALTON BEACH, FL 32547 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02262004 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 20-057095 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 KIEFER, JEREMIAH Street Address (P.O. Box Number is Not Acceptable) 406 BEAR RD. FT. WALTON BEACH, FL 32547 Zip Code FL 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. DIR. ☐ Change ☐ Addition TITLE Delete TITLE KIEFER, JEREMIAH NAME NAME STREET ADDRESS STREET ADDRESS 406 BEAR RD CITY-ST-ZIP FT. WALTON BEACH, FL 32547 CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete TITLE NAME KOTTWITZ, LANCE NAME STREET ADDRESS STREET ADDRESS 406 BEAR RD FT. WALTON BEACH, FL 32547 CITY-ST-ZIP CJTY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE TARWATER, JEFF NAME_ NAME 406 BEAR RD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT. WALTON BEACH, FL 32547 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Defete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE ☐ Defete 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 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 of 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 actions, with all other like empowered. Fremiah Kiefer

SIGNATURE:

RE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/04

(850) ZI 8-0174

FILED