SIGNATURE:

2005 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 14, 2005 8:00 am Secretary of State 04-14-2005 90086 003 ***150.00 DOCUMENT # P04000021629 B & W CASH PROPERTIES, INC. 4 V V J V V V V Principal Place of Business Mailing Address 146 WYNDHAM DR 146 WYNDHAM DR WINTER HAVEN, FL 33884 WINTER HAVEN, FL 33884 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04042005 CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 01-0806973 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent ←6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 City Zip Code 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) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. PD TITLE ☐ Defete TITLE Channe noitibhA 🔲 BILLINGSLEY, STEVEN L NAME NAME STREET ADDRESS 146 WYNDHAM DR STREET ADDRESS WINTER HAVEN, FL 33884 CITY-ST-ZIP City-ST-7IP ☐ Change Addition TITLE ☐ Delete TITLE WAMPLER, CARTER W NAME NAME STREET ADDRESS 146 WYNDHAM DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WINTER HAVEN, FL 33884 TITLE ☐ Delete TITLE Change ☐ Addition WAMPLER, HOLLY F NAME NAME STREET ADDRESS -146 WYNDHAM DR STREET ADDRESS CITY-ST-ZP WINTER HAVEN, FL 33884 CITY-ST-ZIP Defete THE ☐ Addition IIILE BILLINGSLEY, VICKY L MARAE NAME 146 WYNDHAM DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CLTY-ST-ZIP WINTER HAVEN, FL 33884 Change ☐ Addition VD Delete TITLE HICKS, PHILE NAME NAME 146 WYNDHAM DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WINTER HAVEN, FL 33884 CITY-SE-7IP Change ☐ Addition SD ☐ Delete TITLE TITLE HICKS, CYNTHIA J ASST. NAME NAME 146 WYNDHAM DR STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP WINTER HAVEN, FL 33884 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 within address, with all other like empowered.

FILED