2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000022070

Entity Name: M & T PROPERTIES OF NORTH FLORIDA INC.

FILED Feb 23, 2005 Secretary of State

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

P.O. BOX 600277

JACKSONVILLE, FL 32260 US

Current Mailing Address: New Mailing Address:

P.O. BOX 600277

JACKSONVILLE, FL 32260 US

FEI Number: 56-2432630 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:

THIGPEN, WESTON H
524 CARAWAY CT
JACKSONVILLE, FL 32259 US

THIGPEN, WESTON H
316 N. LOMBARDY LOOP
JACKSONVILLE, FL 32259 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: WES THIGPEN 02/23/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: THIGPEN, WESTON H Name: THIGPEN, WESTON H

 Name:
 THIGPEN, WESTON H
 Name:
 THIGPEN, WESTON H

 Address:
 524 CARAWAY CT
 Address:
 316 N. LOMBARDY LOOP

 City-St-Zip:
 JACKSONVILLE, FL 32259 US
 City-St-Zip:
 JACKSONVILLE, FL 32259 US

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

 Name:
 MCCOLLUM, SUSAN P
 Name:
 MCCOLLUM, SUSAN P

 Address:
 3669 HAMPTON GLEN PL.
 Address:
 909 LITTLE LOOP

City-St-Zip: JACKSONVILLE, FL 32257 US City-St-Zip: JACKSONVILLE, FL 32259 US

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: WESTON H THIGPEN P 02/23/2005