

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000032547

FILED
Mar 22, 2005
Secretary of State

Entity Name: FOREVER PROPERTIES, INC.

Current Principal Place of Business:

5263 DEERSPRINGS
CRESTVIEW, FL 32539

New Principal Place of Business:

6489 HIGHWAY 47 NORTH
MILTON, FL 32570

Current Mailing Address:

5263 DEERSPRINGS
CRESTVIEW, FL 32539

New Mailing Address:

6489 HIGHWAY 47 NORTH
MILTON, FL 32570

FEI Number: 27-0079781

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOWMAN, TOM
5263 DEERSPRINGS
CRESTVIEW, FL 32539 US

Name and Address of New Registered Agent:

BOWMAN, TOM
6489 HIGHWAY 47 NORTH
MILTON, FL 32570 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: TOM BOWMAN

03/22/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BOWMAN, TOM T
Address: 5263 DEERSPRINGS
City-St-Zip: CRESTVIEW, FL 42539 US

Title: VP () Delete
Name: DALE, SCOTT C
Address: 302 HIGHWOOD COURT
City-St-Zip: FRANKFORT, KY 40601 US

Title: T () Delete
Name: BOWMAN, KAY A
Address: 5263 DEERSPRINGS
City-St-Zip: CRESTVIEW, FL 32539 US

Title: S () Delete
Name: DALE, TRESINA D
Address: 302 HIGHWOOD COURT
City-St-Zip: FRANKFORT, KY 40601 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BOWMAN, TOM T
Address: 6489 HWY 47 NORTH
City-St-Zip: MILTON, FL 32570 US

Title: VP (X) Change () Addition
Name: DALE, SCOTT C
Address: 70 RIVER BLUFF
City-St-Zip: FRANKFORT, KY 40601 US

Title: T (X) Change () Addition
Name: BOWMAN, KAY A
Address: 6489 HWY 47 NORTH
City-St-Zip: MILTON, FL 32570 US

Title: S (X) Change () Addition
Name: DALE, TRESINA D
Address: 70 RIVER BLUFF
City-St-Zip: FRANKFORT, KY 40601 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: TRESINA DALE

S

03/22/2005

Electronic Signature of Signing Officer or Director

Date