2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2005
Secretary of State

DOCUMENT# P04000048256

Entity Name: R. WAYNE ASSOCIATES, INC.

Current Principal Place of Business:

244 NORTHWEST 101ST AVENUE
PLANTATION, FL 33324 US

New Principal Place of Business:

362 NW SUNVIEW WAY
PORT ST. LUCIE, FL 34986 US

Current Mailing Address:

244 NORTHWEST 101ST AVENUE
PLANTATION, FL 33324 US

New Mailing Address:

362 NW SUNVIEW WAY
PORT ST. LUCIE, FL 34986 US

FEI Number: 03-0538625 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CORCORAN & ELKINS, LLP
200 EAST LAS OLAS BLVD
SUITE 2040
FT. LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: SMITH, WAYNE N
Address: 244 NORTHWEST 101ST AVENUE
City-St-Zip: PLANTATION, FL 33324 US

Title: VP ( ) Delete
Name: SMITH, OLIVIA R
Address: 244 NORTHWEST 101ST AVENUE
City-St-Zip: PLANTATION, FL 33324 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SMITH, WAYNE N
Address: 362 NW SUNVIEW WAY
City-St-Zip: PORT ST. LUCIE, FL 34986 US

Title: VP (X) Change ( ) Addition
Name: SMITH, OLIVIA R
Address: 362 NW SUNVIEW WAY
City-St-Zip: PORT ST. LUCIE, FL 34986 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: WAYNE N. SMITH PRES 02/15/2005

Electronic Signature of Signing Officer or Director — Date