2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

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Secretary of State DOCUMENT # P04000071697 03-18-2005 90055 021 ***150.00 1. Entity Name CARY & SONS, INC. Principal Place of Business Mailing Address 40034630 2005 ROOKERY BAY DRIVE # 1001 2005 ROOKERY BAY DRIVE # 1001 NAPLES, FL 34114 NAPLES, FL 34114 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03072005 CR2E034 (10/03) Chq-P City & State City & State 4. FEI Number Applied For 20-1083603 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 Street Address (P.O. Box Number is Not Acceptable) INCORPORATE USA, INC. 3150 SANDY RIDGE DR CLEARWATER, FL 33761 City 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. ww SIGNATURE te if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. P.S ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME CARY, JERRY A STREET ADDRESS 2005 ROOKERY BAY DRIVE # 1001 STREET ADDRESS NAPLES, FL 34114 CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Delete ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition TITLE □ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7JP CITY_ST_7IP Delete TIME ☐ Change ☐ Addition TITLE 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 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 with an address, with all other like empowered.

FR OR DIRECTOR

FILED Mar 18, 2005 8:00 am