FOR PROFIT CORPORÁTION UNIFORM BUSINESS REPORT (UBR)

FILED Apr 12, 2005 8:00 am Secretary of State

04-12-2005 90125 029 ***150.00 **DOCUMENT #** P04000125126 1. Entity Name Hose Daddy, Inc. DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 3. Mailing Address 25313 Durango Ct 25313 Durango Ct DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For Punta Gorda, FL Punta Gorda, FL 05-0608143 Not Applicable Country, ... Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 33955-4304 Charlotte ... 33955-4304 Charlotte. 7. Name and Address of Current Registered Agent Name Frank J Bishop, Jr. DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) 25313 Durango Ct IN THIS SPACE City Zip Code Punta Gorda 33955-4304 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 9. Election Campaign Financing \$5.00 May Be Amended UBR is \$61.25 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS TITLE TITLE Frank J. Bishop NAME NAME STREET ADDRESS 25313 Durango Ct STREET ADDRESS CITY-ST-ZIP Punta Gorda, FL 33955-4304 CITY-ST-ZIP TITLE TITLE Richard T. Raymond NAME NAME STREET ADDRESS 605 Leo Ave North. STREET ADDRESS CITY-ST-ZIP Lehigh Acres,FL 33971 CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE IN THIS SPACE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME 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 on an attachment with an address, with all other like empowered. Frank J. Bishop, Jr. PD 941-639-5799 SIGNATURE: AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #