2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2005
Secretary of State

DOCUMENT# P04000168813

Entity Name: TRECON SUPPLY, INC.

Current Principal Place of Business:

PO BOX 548
BALDWIN, FL 32234 US

New Principal Place of Business:

880 US HWY 301 S
BALDWIN, FL 32234 US

Current Mailing Address:

PO BOX 548
BALDWIN, FL 32234 US

New Mailing Address:

FEI Number: 20-2024409 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STOKES, TEREA L
880 US HWY 301 SOUTH
JACKSONVILLE, FL 32234 US

Name and Address of New Registered Agent:

STOKES, TEREA L
P O BOX 206
BRYCEVILLE, FL 32009 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: _____ 04/26/2005
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: STOKES, TEREA L
Address: PO BOX 206
City-St-Zip: BRYCEVILLE, FL 32009 US

Title: D ( ) Delete
Name: BROCK, L. WALDO
Address: 7735 OLD NURSERY RD.
City-St-Zip: MACCLENNY, FL 32063 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: TEREA L. STOKES D 04/26/2005
Electronic Signature of Signing Officer or Director — Date