2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

Feb 10, 2006 8:00 am Secretary of State DOCUMENT # P05000043440 01-17-2006 90274 047 ***150.00 RODNEY L. BREWER, INC. Principal Place of Business Mailing Address 2114 CLAIREMONT DRIVE 2114 CLAIREMONT DRIVE 66001168 COCOA, FL 32922 COCOA, FL 32922 2. Principal Place of Business 3. Mailing Address Suite Apt # etc Suite, Apt. #, etc. 01072006 CR2E034 (11/05) City & State 1 FELLIMBER - 2550412 City & State Applied For Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Hame and Address of New Registered Agent BREWER, RODNEY Street Address (P.O. Box Number is Not Acceptable) 2114 CLAIREMONT DRIVE COCOA, FL 32922-Zip Code 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 Signature, typed or priviled name of regulatived agent and title if applicable. (NOTE: Registered Agent algorature required when retreating) DATE \$5.00 May Bo 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE The Control TILLE ☐ Change ☐ Add©tion BREWER, ROONEY L NAME NAME STREET ADDRESS 2114 CLAIREMONT DRIVE STREET ADDRESS COCOA, FL 32922 CTY-51-70 CITY-ST-70 TIFLE ☐ Delete MILE C) Change Addition MARGE HALLE STREET ADDRESS STREET ADDRESS CITY - 51 - 27 CITY-51-27 ms Ocieta ☐ Addition Channe MAG STREET ADDRESS STREET ACCORDES CITY-ST-ZP CITY-ST-ZIP TOLE ☐ Delete Change : ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-70 TILE Delete Change ☐ Addition STREET ACCORESS STREET ADDRESS CITY-51-79 धार-डा-क्र MILE ☐ Delete TITLE ☐ Change ☐ Addition NAME HALF STREET ADDRESS STREET ACCEPESS CITY-ST-ZIP CITY-51-78 12. Thereby certify that the information supptied with this filing does not quality for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and excurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the cooperation 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-exprowered. SIGNATURE:

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