2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007
Secretary of State

DOCUMENT# P05000091058

Entity Name: BIG BEND CUSTOM SERVICES, INC.

Current Principal Place of Business:

40 CHINOOK TRAIL
CRAWFORDVILLE, FL 32327 US

New Principal Place of Business:

517 OAKWOOD TRAIL
CRAWFORDVILLE, FL 32327 US

Current Mailing Address:

40 CHINOOK TRAIL
CRAWFORDVILLE, FL 32327 US

New Mailing Address:

517 OAKWOOD TRAIL
CRAWFORDVILLE, FL 32327 US

FEI Number: 74-3151208 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ADAMSKI, MICHELLE
40 CHINOOK TRAIL
CRAWFORDVILLE, FL 32327 US

Name and Address of New Registered Agent:

ADAMSKI, MICHELLE
517 OAKWOOD TRAIL
CRAWFORDVILLE, FL 32327 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: 04/23/2007
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ADAMSKI, MICHELLE M
Address: 40 CHINOOK TRAIL
City-St-Zip: CRAWFORDVILLE, FL 32327 US

Title: VP ( ) Delete
Name: ADAMSKI, RUSSELL L
Address: 40 CHINOOK TRAIL
City-St-Zip: CRAWFORDVILLE, FL 32327 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: ADAMSKI, MICHELLE M
Address: 517 OAKWOOD TRAIL
City-St-Zip: CRAWFORDVILLE, FL 32327 US

Title: VP (X) Change ( ) Addition
Name: ADAMSKI, RUSSELL L
Address: 517 OAKWOOD TRAIL
City-St-Zip: CRAWFORDVILLE, FL 32327 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: MICHELLE ADAMSKI P 04/23/2007
Electronic Signature of Signing Officer or Director — Date