2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

Mar 23, 2005 08:00 AM **Secretary of State** DOCUMENT # P93000026104 1. Entity Name LENNON COMMUNICATIONS GROUP, INC. Principal Place of Business Mailing Address **6700 WINKLER ROAD** 6700 WINKLER ROAD **SUITE 6 & 7** SUITE 6 & 7 FT. MYERS, FL 33919 US FT. MYERS, FL 33919 US 03092005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0405376 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LENNON, MARJORIE D DO NOT WRITE 6700 WINKLER SUITE 7 FORT MYERS, FL 33919 IN THIS SPACE 3. 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 (NOTE: Registered Agent signature required when reinstating) U00000027**3**071 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. 03/23/05-80013-025 150.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE LENNON, MARJORIE D MAME STREET ADDRESS 6700 WINKLER STE 7 CITY-ST-ZIP FT. MYERS, FL NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f), 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.

ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED