2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 12, 2005 08:00 AM DOCUMENT # P93000030037 **Secretary of State** Entity Name MORTON WOODWORKERS, INC. Mailing Address Principal Place of Business 227 FLORIDA AVE 227 FLORIDA AVE GULF BREEZE, FL 32561 GULF BREEZE, FL 32561 US CR2E034 (10/03) 01032005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3179528 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MORTON, SHAY C DO NOT WRITE 227 FLORIDA AVENUE GULF BREEZE, FL 32564 IN THIS SPACE 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) 9. Election Campaign Financing \$5.00 May Be FILE NOWIII FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE MORTON, NA NAME 227 FLORIDA AVENUE STREET ADDRESS U00000178031 01/12/05-80011-014 150.00 CATY-ST-ZIP GULF BREEZE, FL 32561 TITLE MORTON, SHAY C NAME STREET ADDRESS 227 FLORIDA AVENUE **GULF BREEZE, FL 32561** CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CATY-ST-ZAP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 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 cath; 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.

SIGNATURE: Nell Ollan Matin