

**FILED**  
**Apr 30, 2004 08:00 AM**  
**Secretary of State**

Mailing Address  
3161 HAYLEE LANE  
CRESTVIEW, FL 32539 US

**DO NOT WRITE IN THIS SPACE**



04232004 No Chg-P CR2E034 (10/03)

4. FEI Number  
59-3190228

Applied For
Not Applicable

### 5. Certificate of Status Desired

**\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

COPELAND, KATHLYN  
3161 HAYLEE LANE  
CRESTVIEW, FL 32536

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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.**

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

**9. Election Campaign Financing Trust Fund Contribution.**

**\$5.00 May Be  
Added to Fees**

## 10. OFFICERS AND DIRECTORS

TITLE	D
NAME	COPELAND, PAUL
STREET ADDRESS	3161 HAYLEE LANE
CITY - ST - ZIP	CRESTVIEW, FL 3536

TITLE	D
NAME	COPELAND, KATHLYN
STREET ADDRESS	3161 HAYLEE LANE
CITY - ST - ZIP	CRESTVIEW, FL 32536

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

[illegible]

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12. I hereby certify that the information supplied with this filing 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.

## SIGNATURES

SIGNATURE AND TYPED OR PRINTED NAME OF BORROWING OFFICER OR DIRECTOR

Vice President 4/24/04 850 585-3896