2004 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 27, 2004 08:00 AM **DOCUMENT # P95000041771 Secretary of State** RENNO L. PETERSON, P.A. Principal Place of Business Mailing Address 1605 MAIN STREET 1605 MAIN STREET 700 700 SARASOTA, FL 34236 SARASOTA, FL 34236 US No Chg-P CR2E034 (10/03) 02182004 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Numbe 65-0628655 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 5. Name and Address of Current Registered Agent RENNO L PETERSON DO NOT WRITE 1605 MAIN STREET SUITE 700 SARASOTA, FL 34236 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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 ./000000057890 27/04-80018-083 П Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME PETERSON, RENNO L STREET ADDRESS 1605 MAIN STREET, SUITE 700 CRY-ST-ZIP SARASOTA, FL 34236 TITLE NAME STREET ALUKESS CITY-ST-ZIP TIME NAME STREET ADDRESS DO NOT WRITE CITY -ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CTTY - ST - ZIP रारा ह STREET ADDRESS CHY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 1 19.07(3)(i), Florida Statutes. I further certify that the information indicated on this paper or supplemental report 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 effectives the function that people is required by Chapter 607. Florida Statutes; and that my name appears in Block 10 or Block 11 in changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

TITLE
NAME
STREET ADDRESS
GITY-ST: ZP

SIGNATURE AND TYPED ON PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

2/25/04

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