2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2004
Secretary of State

DOCUMENT# P95000069703

Entity Name: GRANDPA'S CRAFTERS MALL, INC.

Current Principal Place of Business:

4244 JACARANDA DR.
LAKE WALES, FL 33898 US

New Principal Place of Business:

P.O. BOX 1022
DUNDEE, FL 33838 US

Current Mailing Address:

4244 JACARANDA DR.
LAKE WALES, FL 33898 US

New Mailing Address:

P.O. BOX 1022
DUNDEE, FL 33838 US

FEI Number: 59-3337764 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HORNE, KERMIT R
4244 JACARANDA DR.
LAKE WALES, FL 33898

Name and Address of New Registered Agent:

HORNE, KERMIT R
P.O. BOX 1022
DUNDEE, FL 33838

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: _____ 04/23/2004
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: HORNE, KERMIT R
Address: 4244 JACARANDA DR.
City-St-Zip: LAKE WALES, FL 33898

Title: STD ( ) Delete
Name: HORNE, ANNIE L
Address: 4244 JACARANDA DR
City-St-Zip: LAKE WALES, FL 33898 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: HORNE, KERMIT R
Address: P.O. BOX 1022
City-St-Zip: DUNDEE, FL 33838

Title: STD (X) Change ( ) Addition
Name: HORNE, ANNIE L
Address: P.O. BOX 1022
City-St-Zip: DUNDEE, FL 33838 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ANNIE L. HORNE STD 04/23/2004
Electronic Signature of Signing Officer or Director — Date