2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:)

May 06, 2004 8:00 am Secretary of State **DOCUMENT # P95000073464** 05-06-2004 90174 029 ***150.00 RICHARD J. ROACH, JR., P.A. Principal Place of Business Mailing Address 24071822 3396 HOLLY SPRINGS DRIVEX 3396 HOLLY SPRINGS DRIVEX | SPRING HILL, FL 34607 SPRING HILL, FL 34607 US 2. Principal Place of Business 3. Mailing Address 3211 LUGUSTRUM DRIVE 3211 LUGUSTRUM DRIVE Suite, Apt. #, etc. Suite, Apt. #, etc. 04282004 Chq-P CR2E034 (10/03) City & State SPRING HILL, FL City & State SPRING HILL, FL Applied For 4. FEI Number 59-3339603 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 34607 34607 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ROACH, JR., RICHARD J. ROACH, RICHARD J JR Street Address (P.O. Box Number is Not Acceptable) 3211 LUGUSTRUM DRIVE 3396 HOLLY SPRINGS DRIVE SPRING HILL, FL 34607 ^{Z3}4607 SPRING HILL 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 SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2004 Fee will be \$550.00 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 10. DPST Change TITLE ☐ Delete TITLE D/P/S/T ☐ Addition ROACH, RICHARD J JR. NAME NAME ROACH, JR., RICHARD J. STREET ADDRESS 3396 HOLLY SPRINGS DRIVE 3211 LUGUSTRUM DRIVE STREET ADDRESS CITY-ST-ZIP SPRING HILL, FL 34607 CITY-ST-ZIP SPRING HILL, FL 34607 Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition TITLE TITLE □ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 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.

RICHARD U ROACH XIT. 413014

FILED