2005 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 20, 2005 08:00 AM Secretary of State DOCUMENT # P95000073464 RICHARD J. ROACH, JR., P.A. Principal Place of Business Mailing Address 3211 LUGUSTROM DRIVE 3211 LUGUSTROM DRIVE SPRING HILL, FL 34607 SPRING HILL, FL 34607 US 03222005 No Cha-P DO NOT WRITE IN THIS SPACE CR2E034 (10/03) 4. FEI Number Applied For 59-3339603 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ROACH, RICHARD J JR DO NOT WRITE 3211 LUGUSTRUM DRIVE SPRING HILL, FL 34607 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 DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE NAME ROACH, RICHARD J JR. 3211 LUGUSTRUM DRIVE STREET ADDRESS COY-ST-ZIP SPRING HILL, FL 34607 TITLE NAME U00000318242 STREET ADDRESS 04/20/05-80051-006 150.00 CITY-ST-712 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS

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

SIGNATURE:

CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

X4//8/2005 Dayline Priore #

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