2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000078015

Entity Name: BUDDY & DEANNA LONG, INC.

FILED Apr 15, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 601 N MORGAN ST. TAMPA, FL 33602 **Current Mailing Address: New Mailing Address:** 3521 BELL SHOALS RD VALRICO, FL 33594 FEI Number: 59-3342428 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LONG, SHAWN 3521 BELL SHOALS RD. VALRICO, FL 33594 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition LONG, D. C LONG, D. C Name: Name: 6822 OLD POLK CITY 3521 BELL SHAOLS ROAD Address: Address: City-St-Zip: LAKELAND, FL 33809 City-St-Zip: VALRICO, FL 33594 Title: (X) Delete Title: () Change () Addition Name:

LONG, DEANNA Name: 6822 OLD POLK CITY Address: LAKELAND, FL 33809 City-St-Zip:

Title: VPD () Delete LONG, SHAWN Name: 36 CAMERLOT RIDGE DR Address: City-St-Zip: BRANDON, FL 33511

Title: VPD () Delete LONG, SHANNON Name: Address: 17008 HAWK CREST DRIVE

City-St-Zip: LITHIA, FL 33547 Address: City-St-Zip:

Title: VPD (X) Change () Addition

LONG, SHAWN Name:

3521 BELL SHOALS ROAD Address: City-St-Zip: VALRICO, FL 33594

Title: VPD (X) Change () Addition

LONG, SHANNON Name: Address: 3521 BELL SHOALS RAOD City-St-Zip: VALRICO, FL 33594

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: SHAWN C. LONG **VPD** 04/15/2005