2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000095838

Entity Name: BILL OLIVE CORPORATION

FILED Apr 04, 2005 Secretary of State

| Current Principal Place of Business: | | | | New Principal Place of Business: | | |
|---|---|-----------|-------------------------|---|--|--|
| | CHER DRIVE SPRINGS, FL | 34689 | US | | | |
| Current Mailing Address: | | | | New Mailing Address: | | |
| | CHER DRIVE SPRINGS, FL | 34689 | US | | | |
| FEI Number | : 59-3350276 | FEI Nu | mber Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | | Name and Address of | Name and Address of New Registered Agent: | |
| 343 ALME | FIRM OF LAV RIA AVENUE ABLES, FL 33 | | E J SPIEGEL CHRTD JS | | | |
| | named entity e of Florida. | submits | this statement for the | purpose of changing its registered | d office or registered agent, or both, | |
| SIGNATUI | RE: | | | | | |
| Electronic Signature of Registered Ager | | | | gent | Date | |
| Election Ca | mpaign Financir | g Trust F | und Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | | ADDITIONS/CHANGE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | PSTD (OLIVE, WILLIA 1322 BELCHE TARPON SPRI | R DRIVE | 34689 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | VP (OLIVE, WHITN 1322 BELCHE TARPON SPRI | R DRIVE | 34689 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | VP (OLIVE, PATRI 1322 BELCHE TARPON SPRI | R DRIVE | 34689 | Title: Name: Address: Citv-St-Zip: | () Change () Addition | |

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: WILLIAM R OLIVE, JR. PRES 04/04/2005