2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2005
Secretary of State

DOCUMENT# P96000002468

Entity Name: DEWHURST CORPORATION

Current Principal Place of Business:

720-3 ST JOHNS BLUFF RD N
JACKSONVILLE, FL 32225

New Principal Place of Business:

Current Mailing Address:

4434 BEACON DRIVE
JACKSONVILLE, FL 32225

New Mailing Address:

FEI Number: 59-3361950 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BLINN, LEWIS
720-3 ST. JOHNS BLUFF RD. N.
JACKSONVILLE, FL 32225 US

Name and Address of New Registered Agent:

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:

Title: P ( ) Delete
Name: BLINN, PATRICIA
Address: 4434 BEACON DR W
City-St-Zip: JAX, FL

Title: S ( ) Delete
Name: WIGGINS, SUSAN BLINN
Address: 2419 BLACK BEARD DR
City-St-Zip: JAX, FL

Title: VP ( ) Delete
Name: BLINN, JR LEWIS G
Address: 4434 BEACON DR W
City-St-Zip: JAX, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: BLINN, PATRICIA
Address: 4434 BEACON DR W
City-St-Zip: JAX, FL 32225

Title: S (X) Change ( ) Addition
Name: WIGGINS, SUSAN BLINN
Address: 2419 BLACK BEARD DR
City-St-Zip: JAX, FL 32224

Title: VP (X) Change ( ) Addition
Name: BLINN, JR LEWIS G
Address: 4434 BEACON DR W
City-St-Zip: JAX, FL 32225

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: LEWIS BLINN VP 01/17/2005

Electronic Signature of Signing Officer or Director Date