


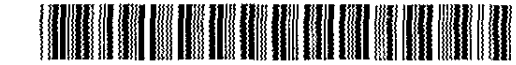
**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 22, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P96000046383</b> 1. Entity Name SAWYER OIL AND GAS COMPANY, INC.	
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Principal Place of Business 4641 NW 28TH WAY BOCA RATON, FL 33434	Mailing Address 4641 NW 28TH WAY BOCA RATON, FL 33434
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**DO NOT WRITE IN THIS SPACE**



02282004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0681413	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
  
SAWYER, WILLIAM G  
4641 NW 28TH WAY  
BOCA RATON, FL 33434

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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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering) DATE

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD SAWYER, WILLIAM G 4641 NW 28TH WAY BOCA RATON, FL 33434
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SAWYER, DONALD G 6562 BOCA DEL MAR DRIVE APT 323 BOCA RATON, FL 33433
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D THERESA, SAWYER T 4641 NW 28TH WAY BOCA RATON, FL 33434
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04/22/04-80077-019 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:** William G. Sawyer **WILLIAM G. SAWYER** **Apr 120, 2004** **(561) 393-6603**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day/night Phone #