2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

Apr 28, 2005 08:00 AM Secretary of State **DOCUMENT # P96000093407** 1. Entity Name LANGFORD PROPERTIES, INC. Principal Place of Business Mailing Address 5001 4TH STREET NORTH., STE A 5001 4TH STREET NORTH., STE A ST PETERSBURG, FL 33703 ST PETERSBURG, FL 33703 No Cha-P CR2E034 (10/03) 04252005 DO NOT WRITE IN THIS SPACE Applied For 4, FEI Number 59-3411213 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LANG, NICHOLAS F PA DO NOT WRITE 5001 4TH STREET NORTH., STE A ST PETERSBURG, FL 33703 IN THIS SPACE 3. 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 rainstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PTD TITLE NAME LANG, SARAH F STREET ADDRESS 5001 4TH STREET NORTH., STE A UHUUUU340200 ST PETERSBURG, FL 33703 CITY-ST-ZIP 04728/05-80106-019 150.00 TITLE NAME LANG, NICHOLAS F STREET ADDRESS 5001 4TH STREET NORTH., STE A ST PETERSBURG, FL 33703 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(7), 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 flustee 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.

FILED