2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005
Secretary of State

DOCUMENT# P97000049253

Entity Name: COST CAST, INC.

Current Principal Place of Business:

1301 COMMERCE AVE.
HAINES CITY, FL 33844 US

New Principal Place of Business:

Current Mailing Address:

C/O JEFFERY OWEN, ESQ.
223 4TH AVE., STE. 1600
PITTSBURGH, PA 152221713 US

New Mailing Address:

1301 COMMERCE AVE.
HAINES CITY, FL 33844 US

FEI Number: 23-2906243 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KALLMEYER, GARY M
6715 NELLS WAY
LAKELAND, FL 33813 US

Name and Address of New Registered Agent:

KALLMEYER, GARY M
817 GULF COURSE PKWY
DAVENPORT, FL 33837 US

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: _____ 04/25/2005
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PT ( ) Delete
Name: KALLMEYER, GARY M
Address: 6715 NELLS WAY
City-St-Zip: LAKELAND, FL 33813

Title: SVP ( ) Delete
Name: KALLMEYER, SHERRY
Address: 6715 NELLS WAY
City-St-Zip: LAKELAND, FL 33813

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change ( ) Addition
Name: KALLMEYER, GARY M
Address: 817 GULF COURSE PKWY
City-St-Zip: DAVENPORT, FL 33837

Title: SVP (X) Change ( ) Addition
Name: KALLMEYER, SHERRY
Address: 817 GULF COURSE PKWY
City-St-Zip: DAVENPORT, FL 33837

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: SHERRY KALLMEYER SVP 04/25/2005
Electronic Signature of Signing Officer or Director — Date