2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Sep 15, 2004 8:00 am **DOCUMENT # P97000070181** Secretary of State 1. Entity Name 09-15-2004 90001 012 ***550.00 SIMSBURY CORPORATION Principal Place of Business Mailing Address 13929 155TH PL N 13929 155TH PL N 54072939 JUPITER FL 33478 JUPITER FL 33478 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) City & State City & State 4. FEI Number Applied For 05-0582278 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MANDERVILLE, BRYAN ESQ Street Address (P.O. Box Number is Not Acceptable) 13929 155TH PL N JUPITER FL 33478 City Zip Code 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 reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE TITLE ☐ Delete ☐ Addition NAME MANDERVILLE, MICHELE NAME STREET ADDRESS 13929 155TH PL N STREET ADDRESS CITY-ST-ZIP JUPITER FL 33478 CITY-ST-ZIP TITLE ☐ Delete ☐ Change TITLE ☐ Addition MANDERVILLE, BRANDON NAME NAME STREET ADDRESS 13929 155TH PL N STREET ADDRESS CITY-ST-ZIP JUPITER FL: 33478 CITY-ST-ZIE TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS City - ST - ZiP CITY-ST-ZIP ☐ Delete TITLE TIT) F ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change TITLE TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7(P

12. I hereby certify that the information supplied with this filing does not qualify 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 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE AND TYPED OR TYPED OR PRINTED NAME OF SIGNATURE AND TYPED OR TYPED

D OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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September 8, 2004

Division of Corp. 409 East Gaines Street Tallahassee, Florida 32399

RE: SIMSBURY CORPORATION

To Whom It May Concern:

Please find enclosed a check in the amount of \$550.00. Please make sure that this goes through as I was involved in Hurricane Frances since Wednesday of last week and could not get this out in the appropriate fashion that it should have been sent.

Thank you so much for your kind consideration.

M. Mardewelle

Sincerely,

Michele Manderville