2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2004
Secretary of State

DOCUMENT# P97000077622

Entity Name: LARCOA, INC.

Current Principal Place of Business:

4055 GROVE POINT RD.
PALM BEACH GARDENS, FL 33410 US

New Principal Place of Business:

7039 SE SLEEPY HOLLOW LANE
STUART, FL 34997 US

Current Mailing Address:

4055 GROVE POINT RD.
PALM BEACH GARDENS, FL 33410 US

New Mailing Address:

7039 SE SLEEPY HOLLOW LANE
STUART, FL 34997 US

FEI Number: 65-0778890 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COATES, MARION E JR
4055 GROVE POINT ROAD
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

COATES, MARION E JR
7039 SE SLEEPY HOLLOW LANE
STUART, FL 34997 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: _____ 04/27/2004
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: LARSON, KIMBERLY
Address: 4055 GROVE POINT ROAD
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D ( ) Delete
Name: COATES, MARION E JR
Address: 4055 GROVE POINT ROAD
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: LARSON, KIMBERLY
Address: 7039 SE SLEEPY HOLLOW LANE
City-St-Zip: STUART, FL 34997

Title: D (X) Change ( ) Addition
Name: COATES, MARION E JR
Address: 7039 SE SLEEPY HOLLOW LANE
City-St-Zip: STUART, FL 34997

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: KIMBERLY LARSON MRS. 04/27/2004
Electronic Signature of Signing Officer or Director — Date