2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

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Apr 26, 2004 8:00 am Secretary of State **DOCUMENT # P97000108696** 04-26-2004 90530 037 ***150.00 KEELEY AND SMITH ACCOUNTING, INC. Principal Place of Business Mailing Address 8200 W HWY 98 8200 W HWY 98 SUITE A SUITE A PENSACOLA FL 32506 PENSACOLA FL 32506 2. Principal Place of Business 3. Mailing Address 6103 W. CR2E034 (11/03) MOORE Applied For 4. FEI Number 59-3483841 MISACO CA Not Applicable \$8.75 Additional 5. Certificate of Status Desired ESCAM Fee Required Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KEELEY, GERARD J 100 BASS LAKE STREET PENSACOLA FL 32506 Street Address (P.O. Box Number is Not Acceptable) 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 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. Addition TITLE TITLE ☐ Delete NAME KEELEY, GERARD J NAME 3345 PITCHER PLANT CIR STREET ADDRESS 100 BASS LAKE ST STREET ADDRESS CITY-ST-ZIP PENSACOLA FL 32506 CITY-ST-ZIP ☐ Addition ☐ Delete TITLE TITLE SMITH, BERNEY NAME NAME STREET ADDRESS 7588 TIPPIN AVE STREET ADDRESS PENSACOLA FL 32514 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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)(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 stustee 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