2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 22, 2004 8:00 am **Secretary of State** DOCUMENT # P98000012282 03-22-2004 90069 024 ***150.00 SOUND HAMMOCK, INC. Principal Place of Business Mailing Address 6701 PENSACOLA BLVD PENSACOLA FL 32505 6701 PENSACOLA BLVD PENSACOLA FL 32505 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (11/03) City & State City & State 4. FEI Number Applied For 59-3496926 Not Applicable Zip Country Zip 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 Name FADDIS, CHARLES F Street Address (P.O. Box Number is Not Acceptable) 6701 PENSACOLA BLVD PENSACOLA FL 32505 Zip Code FL 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, lyped or printed name of registered agont 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. DP TITLE ☐ Delete TITLE ☐ Change ☐ Addition FADDIS, CHARLES F NAME NAME 6701 PENSACOLA BLVD STREET ADDRESS STREET ADDRESS PENSACOLA FL 32505 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Delete TITLE TITLE Addition LOCKWOOD, RICHARD A NAME NAME 4121 Stringfield Rd STREET ADDRESS 6701-PENSACOLA BLVD-STREET ADDRESS CITY-ST-ZIP PENSACOLA FL 32505 CITY-ST-ZIP Pensacola FL 32505 TITLE ☐ Change ☐ Addition ☐ Delete TITLE NAME KENNEDY, CARTER'S STREET ADDRESS STREET ADDRESS P.O. BOX 531158 CITY-ST-ZIP BIRMINGHAM AL 35253 CITY-ST-ZIP ☐ Delete Addition O'SULLIVAN, I L JR. NAME NAME P.O. BOX 101329 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BIRMINGHAM AL 35210** CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 his 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 SIGNING OFFICER OR DIRECTOR

Charles F. Faddis

2/24/04

FILED

850-478-4100

Daytime Phone #