

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005 8:00 am
Secretary of State

04-29-2005 90268 024 ***150.00

DOCUMENT # P98000021500 1. Entity Name SNEAD ISLAND INVESTMENT CO.			
Principal Place of Business 303 NINTH STREET WEST SUITE 201 BRADENTON, FL 34205		Mailing Address 303 NINTH STREET WEST SUITE 201 BRADENTON, FL 34205	
2. Principal Place of Business 4317 Pinfish Ln Suite, Apt. #, etc.		3. Mailing Address PO Box 1660 Suite, Apt. #, etc.	
City & State Pal Metto, FL Zip 34221 Country USA		City & State Palmetto, FL Zip 34220 Country USA	
4. FEI Number 65-0838331		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GRAVELY, JEFFREY D 303 NINTH STREET WEST SUITE 201 BRADENTON, FL 34205		7. Name and Address of New Registered Agent Name Stephenson, James F. JR. Street Address (P.O. Box Number is Not Acceptable) 4317 Pinfish Lane City Palmetto FL Zip Code 34221	
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 <i>Jim J. Stephenson</i> DATE 4/26/05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOT: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE PS NAME GRAVELY, JEFFREY D <input type="checkbox"/> Delete STREET ADDRESS 303 NINTH STREET, SUITE 201 CITY-ST-ZIP BRADENTON, FL 34205	TITLE PS NAME Gravely, Jeffrey D. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition STREET ADDRESS 4317 Pinfish Ln CITY-ST-ZIP Pal, FL 34221		
TITLE VT NAME STRPHENSON, JAMES F JR <input type="checkbox"/> Delete STREET ADDRESS 303 NINTH STREET WEST, SUITE 201 CITY-ST-ZIP BRADENTON, FL 34205	TITLE VT NAME Stephenson, James JR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition STREET ADDRESS 4317 Pinfish Lane CITY-ST-ZIP Pal, FL 34221		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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: <i>Jim J. Stephenson</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date 4/26/05 Daytime Phone # 941-730-3033	