


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 08, 2005 8:00 am
Secretary of State

07-08-2005 90023 013 ***150.00

DOCUMENT # P98000064063 1. Entity Name MAINE TRADING COMPANY		
Principal Place of Business 650 NORTH TAMiami TRAIL OSPREY, FL 34229	Mailing Address 650 NORTH TAMiami TRAIL OSPREY, FL 34229	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent MEADOR, ROBERT D 650 N TAMiami TRAIL OSPREY, FL 34229		DO NOT WRITE IN THIS SPACE
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)</small>		
FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PT MEADOR, ROBERT D 650 N TAMiami TRAIL OSPREY, FL	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPS MEADOR, KATHLEEN 650 N TAMiami TRAIL OSPREY, FL	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS 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 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: <u>Kathleen Meador</u> <u>Kathleen Meador</u> <u>6-20-05</u> <u>941-966-3661</u> #209 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>		

30000287



06202005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0852596	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

ATTACHMENT
Osprey Trading Company

798 000064063
50055287

June 20, 2005

Dear Florida Department of State;

Per our conversation with your examiner on 6/20/2005 when we advised her we had not received notice of filing and called to inquire, she stated upon our sending this letter that we are only required to pay the \$150.00 due which is enclosed with our report.

Thank You,

Robert D. Meador
Rm

Robert D. Meador

The Oaks Office: 650 N. Tamiami Trail, Osprey, FL 34229 Tel. 941.966-3661. Fax 941.966.1893
The Osprey Office: 458 N. Tamiami Trail, Osprey, FL 34229 Tel. 941.966.3626. Fax 941.966.1893

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