2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2004
Secretary of State

DOCUMENT# P98000068655

Entity Name: DAN WOLFE MASONRY, INC.

Current Principal Place of Business:

4420 GANYARD ST.
PORT CHARLOTTE, FL 33980

New Principal Place of Business:

29420 PINE VILLA CIRCLE
PUNTA GORDA, FL 33982

Current Mailing Address:

4420 GANYARD ST.
PORT CHARLOTTE, FL 33980

New Mailing Address:

P.O. BOX 510175
PUNTA GORDA, FL 33951

FEI Number: 65-0858056 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WOLFE, DAN
4420 GANYARD ST.
PORT CHARLOTTE, FL 33980

Name and Address of New Registered Agent:

WOLFE, DAN
29420 PINE VILLA CIRCLE
PUNTA GORDA, FL 33982

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: DP ( ) Delete
Name: WOLFE, DAN
Address: 4420 GANYARD ST.
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: DST ( ) Delete
Name: WOLFE, HEIDI
Address: 4420 GANYARD ST.
City-St-Zip: PORT CHARLOTTE, FL 33980

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: WOLFE, DAN
Address: 29420 PINE VILLA CIRCLE
City-St-Zip: PUNTA GORDA, FL 33982

Title: DST (X) Change ( ) Addition
Name: WOLFE, HEIDI
Address: 29420 PINE VILLA CIRCLE
City-St-Zip: PUNTA GORDA, FL 33982

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: HEIDI M. WOLFE DST 04/27/2004
Electronic Signature of Signing Officer or Director — Date