2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 19, 2004 08:00 AM Secretary of State **DOCUMENT # P98000081383** EDWARD T. CULBERTSON, P.A. Mailing Address Principal Place of Business 3621 CENTRAL AVE. 3621 CENTRAL AVE. SAINT PETERSBURG, FL 33713 SAINT PETERSBURG, FL 33713 No Chg-P CR2E034 (10/03) 01052004 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3534432 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent CULBERTSON, EDWARD T DO NOT WRITE 3621 CENTRAL AVE. IN THIS SPACE SAINT PETERSBURG, FL 33713 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 DÄTE Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when rainstature) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. OFFICERS AND DIRECTORS 10. TITLE CULBERTSON, EDWARD T NAME 3621 CENTRAL AVE STREET ADDRESS SAINT PETERSBURG, FL 33713 CCTY-ST-ZIP TITLE 04/19/04-20089-007 150.00 NAME STREET ADDRESS CITY-57-7IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information porf 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 empowered to execute this report as required by Chapter 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if resp. with all other like empowered. 12. I hereby certify that the information adpolic indicated on this report or supplemental to of the corporation or the receiver or trustee changed, or on an attachment with an act.

SIGNATURE:

STREET ADDRESS COTY-ST-ZIP