2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 21, 2004
Secretary of State

DOCUMENT# P99000058813

Entity Name: NORTH FLORIDA SAFETY AND TRAINING CENTER, INC.

Current Principal Place of Business:

RT. 10, BOX 521-K
LAKE CITY, FL 32025

New Principal Place of Business:

325 SW BRODERICK DR.
LAKE CITY, FL 32025

Current Mailing Address:

RT. 10, BOX 521-K
LAKE CITY, FL 32025

New Mailing Address:

325 SW BRODERICK DR.
LAKE CITY, FL 32025

FEI Number: 59-3590264 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

NICHOLS, LEROY
RT 10, BOX 521-K
LAKE CITY, FL 32025

Name and Address of New Registered Agent:

NICHOLS, LEROY
325 SW BRODERICK DR.
LAKE CITY, FL 32025

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: 05/21/2004
Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: NICHOLS, LEROY
Address: RT 10, BOX 521-K
City-St-Zip: LAKE CITY, FL 32025

Title: D ( ) Delete
Name: NICHOLS, JANE
Address: RT 10, BOX 521-K
City-St-Zip: LAKE CITY, FL 32025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: NICHOLS, LEROY
Address: 325 SW BRODERICK DR.
City-St-Zip: LAKE CITY, FL 32025

Title: D (X) Change ( ) Addition
Name: NICHOLS, JANE
Address: 325 SW BRODERICK DR.
City-St-Zip: LAKE CITY, FL 32025

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: LEROY NICHOLS D 05/21/2004
Electronic Signature of Signing Officer or Director — Date