2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000084876

FILED Apr 19, 2004 Secretary of State

Entity Name: LAKE CITY LOGISTICS OF JACKSONVILLE INC.

| Current Princ | cipal Place | of Business: | | New Principal Pla | ace of Business: |
|--|---|---|----------------|--------------------------------|---|
| 202 W. MARK STARKE, FL | KET RD., #7 32091 | | | | |
| Current Mailing Address: | | | | New Mailing Address: | |
| P.O. BOX 115 EUFAULA, AL | | | | | |
| FEI Number: 63- | -1242687 | FEI Number Applie | ed For () | FEI Number Not Applicable (| Certificate of Status Desired () |
| Name and Ad | ddress of C | urrent Registere | d Agent: | Name and Addres | ss of New Registered Agent: |
| LAWRENCE, 20953 NW 55 | | | | | |
| _AWTEY, FL The above na n the State of | 32058 U med entity s f Florida. | | nent for the p | ourpose of changing its regist | ered office or registered agent, or both, |
| _AWTEY, FL The above na | 32058 U amed entity s f Florida. | | · | | ered office or registered agent, or both, Date |
| _AWTEY, FL The above na n the State of SIGNATURE: | 32058 U med entity s F Florida. : Electroni | ubmits this staten | gistered Age | | |
| LAWTEY, FL The above na n the State of SIGNATURE: Election Campa | 32058 U med entity s f Florida. Electroni aign Financing | ubmits this staten c Signature of Re | gistered Age | ent | |
| LAWTEY, FL The above na n the State of SIGNATURE: Election Campa OFFICERS A Fittle: P' Name: Bi Address: 10 | 32058 U med entity s Felorida. Electroni aign Financing | ubmits this staten c Signature of Re Trust Fund Contrib FORS: Delete E R. | gistered Age | ent | Date |

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: STEVE BROWN P 04/19/2004