2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 20, 2005
Secretary of State

DOCUMENT# P99000100950

Entity Name: HALSTED RIVERS, INC.

Current Principal Place of Business:

5125 CASTELLO DR.
NAPLES, FL 34103

New Principal Place of Business:

223 DOLPHIN COVE COURT
BONITA SPRINGS, FL 34134

Current Mailing Address:

5125 CASTELLO DR.
NAPLES, FL 34103

New Mailing Address:

223 DOLPHIN COVE COURT
BONITA SPRINGS, FL 34134

FEI Number: 54-1718871 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MILLER, ROGER
5125 CASTELLO DR.
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

MILLER, ROGER
223 DOLPHIN COVE COURT
BONITA SPRINGS, FL 34134 US

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: 07/20/2005
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PS ( ) Delete
Name: HOPKINS, JEANNETTE
Address: 10 BROWN ST.
City-St-Zip: PROVIDENCE, RI 029061111

Title: VT ( ) Delete
Name: HOPKINS, RICHARD
Address: 10 BROWN ST.
City-St-Zip: PROVIDENCE, RI 029061111

Title: D ( ) Delete
Name: MILLER, ROGER
Address: 5125 CASTELLO DR.
City-St-Zip: NAPLES, FL 34103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: MILLER, ROGER
Address: 223 DOLPHIN COVE COURT
City-St-Zip: NAPLES, FL 34134

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: JEANNETTE HOPKINS PS 07/20/2005
Electronic Signature of Signing Officer or Director — Date