2004 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 21, 2004 8:00 am Secretary of State DOCUMENT # S48697 04-21-2004 90033 042 ***150.00 1. Entity Name LORD & COMPANY, INC. Principal Place of Business Mailing Address 6302 US HWY 41 S 6302 US HWY 41 S RUSKIN, FL 33570 RUSKIN, FL. 33570 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04132004 CR2E034 (10/03) Chg-P City & State 4. FEI Number Applied For City & State 65-0276168 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name STEVE, DYE P Street Address (P.O. Box Number is Not Acceptable) 111 THIRD AVE W. SUITE 300 BRADENTON, FL 34206 Zip Code 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOWILL FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE □ Change ☐ Addition □ Delete SHEPARD, CARL L. NAME NAME STREET ADDRESS 4948 VALROY RD STREET ADDRESS CITY-ST-ZIP RUSKIN, FL 33570 CITY-ST-ZIP **DVTS** Delete ☐ Change ■ Addition SHEPARD, DORIS NAME NAME 4948 VALROY RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **RUSKIN, FL 33570** CITY-ST-ZIP ☐ Delete DST TITLE ☐ Change XX Addition TITLE NAME NAME Cook, Donna STREET ADDRESS STREET ADDRESS 45 Larkspur Palmetto, FL CITY-ST-ZIP CITY-ST-7IP 34221 ☐ Delete TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 truetee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

CARL 1. Shepard 4/14/04 941-722 122

of the corporation or the receiver of changed, or on an attachment with

SIGNATURE:

FILED