



2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90579 006 ***150.00

DOCUMENT # S53820 1. Entity Name SOUTH WALTON EQUITIES, INC.																															
Principal Place of Business 10221 W EMERALD COAST PKWY SUITE 26 DESTIN, FL 32550 US		Mailing Address 10221 W EMERALD COAST PKWY SUITE 26 DESTIN, FL 32550 US																													
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.																													
City & State MIRAMAR BEACH, FL Zip Country		City & State MIRAMAR BEACH, FL Zip Country																													
																															
		01092004 Chg-P CR2E034 (10/03)																													
		4. FEI Number 59-3110117 Applied For <input type="checkbox"/> Not Applicable																													
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																													
6. Name and Address of Current Registered Agent WALLACE, W. WADE 10221 W EMERALD COAST PKWY. SUITE 26 DESTIN, FL 32541		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City MIRAMAR BEACH FL Zip Code 32550																													
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 <u><i>W. Wade Wallace</i></u> W. WADE WALLACE 4/22/04 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																															
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																													
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width:70%;"> PTD WALLACE, DANICE M 58 SARASOTA ST. DESTIN, FL 32550 <input type="checkbox"/> Delete </td> </tr> <tr> <td> VSD WALLACE, W WADE 58 SARASOTA ST. DESTIN, FL 32550 <input type="checkbox"/> Delete </td> <td></td> </tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </table>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD WALLACE, DANICE M 58 SARASOTA ST. DESTIN, FL 32550 <input type="checkbox"/> Delete	VSD WALLACE, W WADE 58 SARASOTA ST. DESTIN, FL 32550 <input type="checkbox"/> Delete												11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width:70%;"> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition MIRAMAR BEACH, FL 32550 </td> </tr> <tr> <td> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition MIRAMAR BEACH, FL 32550 </td> <td></td> </tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </table>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition MIRAMAR BEACH, FL 32550	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition MIRAMAR BEACH, FL 32550											
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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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																															
SIGNATURE <u><i>Danice M. Wallace</i></u> DANICE M. WALLACE <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		4/22/04 (850)837-0155 <small>Date Daytime Phone #</small>																													