

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S73962

Entity Name: PIERCE GROUP, INC.

FILED
May 23, 2005
Secretary of State

Current Principal Place of Business:

5125 SR 13 N
SAINT AUGUSTINE, FL 32092 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 167
ORANGE PARK, FL 320670167 US

New Mailing Address:

FEI Number: 59-3076810 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DOSS, CALVIN P.
5125 SR 13 N
SAINT AUGUSTINE, FL 32092 US

Name and Address of New Registered Agent:

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: _____

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: P () Delete
Name: DOSS, CALVIN P.,
Address: PO BOX 167 N/A
City-St-Zip: ORANGE PARK, FL 320670167 US

Title: VPST () Delete
Name: DOSS, MARILYN B.,
Address: PO BOX 1399
City-St-Zip: ORANGE PARK, FL 320671399 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: MARILYN B. DOSS

VPST

05/23/2005

Electronic Signature of Signing Officer or Director

Date