2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V02023

FILED Apr 30, 2004 Secretary of State

Entity Name: BOSSHARDT PROPERTY MANAGEMENT, INC.

Current Principal Place of Business: New Principal Place of Business:

5532 NW 43 ST 108 B NW 76TH DRIVE

STE A GAINESVILLE, FL 32607 US GAINESVILLE, FL 32653 US

Current Mailing Address: New Mailing Address:

5532 NW 43 ST STE A

GAINESVILLE, FL 32653 US

FEI Number: 59-3099689 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SHEA, JOE MOULTON, CLAUDE 5532 NW 43RD ST. 5532 NW 43RD ST.

GAINESVILLE, FL 32653 US GAINESVILLE, FL 32653 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: CLAUDE MOULTON 04/30/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPSV () Delete Title: VP (X) Change () Addition

 Name:
 BOSSHARDT, CAROL
 Name:
 BOSSHARDT, CAROL

 Address:
 5542 NW 43 STREET
 Address:
 5542 NW 43 STREET

 City-St-Zip:
 GAINESVILLE, FL
 City-St-Zip:
 GAINESVILLE, FL

Title: P () Delete Title: () Change () Addition

 Name:
 BOSSHARDT, AARON M
 Name:

 Address:
 5532 NW 43RD ST.
 Address:

 City-St-Zip:
 GAINESVILLE, FL 32653
 City-St-Zip:

Title: D () Delete Title: D (X) Change () Addition

 Name:
 SHEA, JOE
 Name:
 MOULTON, CLAUDE

 Address:
 5532 NW 43RD ST.
 Address:
 5532 NW 43RD ST.

 City-St-Zip:
 GAINESVILLE, FL 32653
 City-St-Zip:
 GAINESVILLE, FL 32653

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: AARON BOSSHARDT P 04/30/2004