2005 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 25, 2005 8:00 am Secretary of State DOCUMENT # V29459 04-25-2005 90245 038 ***150.00 1. Entity Name WEBBER CORPORATION OF PANAMA CITY Principal Place of Business Mailing Address 9807 FRONT BEACH RD. 9807 FRONT BCH RD. PANAMA CITY BEACH, FL 32407 PANAMA CITY BEACH, FL 32407 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01212005 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 63-0704421 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HUTCHINSON, EDWARD A JR Street Address (P.O. Box Number is Not Acceptable) 221 MCKENZIE AVE PREPARED BY PANAMA CITY, FL 32401 JENKINS Zip Code FL 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 Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 D Delete TITLE TITLE Change ☐ Addition WEBBER, FREDRICK R NAME NAME STREET ADDRESS 112 GRAND HERON DRIVE STREET ADDRESS PANAMA CITY BCH, FL 32407 CITY-ST-7IP CITY- ST-7IP TITLE ☐ Defete TITLE ☐ Change Addition WEBBER, HENRY NAME NAME P.O. BOX 27545 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PANAMA CITY BEACH, FL 32411 CITY-ST-ZIP TITLE ☐ Delete TITLE □ Change ☐ Addition WEBBER, MICHAEL NAME NAME STREET ADDRESS 166 BOCA L'AGOON DR STREET ADDRESS CITY-ST-ZIP PANAMA CITY BEACH, FL COY-ST-7P Corporate Secutary Delete TITLE TITLE Addition ☐ Change Webber, Laura NAME NAME PO BOY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF CL 32411 TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS COY-ST-ZIP CITY-ST-7IP TITLE ☐ Defete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF

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.

ANGL A. Wibber

SIGNATURE L Will

FILED

BD -258-5909