2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 15, 2004 08:00 AM Secretary of State **DOCUMENT # V34446** 1. Entity Name MCCAULEY - HART, INC. Principal Place of Business Mailing Address 2527 CARTER GROVE CIRCLE 2527 CARTER GROVE CIRCLE WINDERMERE, FL 34786 WINDERMERE, FL 34786 04112004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3129581 Not Applicable \$8.75 Additional Fee Required 5. Certificate of Status Desired 5. Name and Address of Current Registered Agent HENSLER, KATHLEEN M. DO NOT WRITE 2527 CARTER GROVE CIRCLE WINDERMERE, FL 34786 IN THIS SPACE 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 the Mapplicable (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 U00000113592 Trust Fund Contribution Added to Fees <u>04/15/04-80015-025 150 00</u> OFFICERS AND DIRECTORS 10. HENSLER, KATHLEEN M. NAME STREET ADDRESS 2527 CARTER GROVE CIRCLE CXTY-SX-ZXP WINDERMERE, FL 34786 BRE MAZJE STREET ADDRESS CITY-ST-ZIP 7474 F NAME STREET ADDRESS DO NOT WRITE CATY-ST-ZIP IN THIS SPACE 3.03 NAME STREET ADDRESS CRY-ST-ZIP 333L£ NAME STREET ADDRESS

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 I fort as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attack

SIGNATURE:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-71P