2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V73229

FILED Mar 29, 2004 Secretary of State

Entity Name: DAWN FINANCIAL CORPORATION

| Current P | rincinal Plac | e of Business: | New Principal Place | of Business: |
|--|--|--|--|---|
| Juileilei | imerpai i iae | o or Business. | new i interpart race | or Business. |
| | CO PLUM LAI FL 34119 I | NE JS | | |
| Current M | lailing Addre | ss: | New Mailing Addres | ss: |
| | CO PLUM LAI FL 34119 | NE JS | | |
| El Number | : 59-3150387 | FEI Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () |
| Name and | Address of | Current Registered Agent: | Name and Address of | of New Registered Agent: |
| , | HARLES M JF | 2. | | |
| SUITE 315 NAPLES, | FL 34105 US | | | |
| SUITE 315 NAPLES, The above | 5 FL 34105 US | | urpose of changing its registere | ed office or registered agent, or both, |
| SUITE 315 NAPLES, The above | 5 FL 34105 US named entity e of Florida. RE: | submits this statement for the p | | ed office or registered agent, or both, |
| SUITE 315 NAPLES, The above n the State | 5 FL 34105 US named entity e of Florida. RE: | | | ed office or registered agent, or both, Date |
| SUITE 315 NAPLES, The above n the State SIGNATUI | FL 34105 US named entity of Florida. RE: Electro | submits this statement for the p | | |
| SUITE 315 NAPLES, The above the State SIGNATUE SIECTION Cal | FL 34105 US named entity of Florida. RE: Electro | submits this statement for the p nic Signature of Registered Age | ent | |
| SUITE 315 NAPLES, The above the State SIGNATUE SIGNATUE | FL 34105 US named entity e of Florida. RE: Electro mpaign Financir S AND DIREC | submits this statement for the p nic Signature of Registered Age ng Trust Fund Contribution (). CTORS:) Delete LYN S A LANE | ent | Date |
| SUITE 315 NAPLES, The above the State SIGNATUI Clection Car DFFICER ittle: lame: ddress: | FL 34105 US named entity of Florida. RE: Electro mpaign Financir S AND DIREC DPST (WOOD, MARII 5950 SONOM, NAPLES, FL 3 | submits this statement for the p nic Signature of Registered Age ng Trust Fund Contribution (). CTORS:) Delete _YN S A LANE 84119) Delete _YN S PLUM LANE | ADDITIONS/CHANG Title: Name: Address: | Date ES TO OFFICERS AND DIRECTOR |

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: JAMES J. WOOD VP 03/29/2004