

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J73708

FILED  
Apr 21, 2004  
Secretary of State

Entity Name: CHOATE COMMERCIAL ENTERPRISES, INC.

**Current Principal Place of Business:**

7193 SR 54 # 279  
NEW PORT RICHEY, FL 34653 US

**New Principal Place of Business:**

**Current Mailing Address:**

7193 SR 54 # 279  
NEW PORT RICHEY, FL 34653 US

**New Mailing Address:**

777 MIDDLE RD  
#23  
PORTSMOUTH, NH 038801 US

FEI Number: 59-2812479      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

RAYBURN, LAURA J.  
1968 BAYSHORE BOULEVARD  
DUNEDIN, FL 33528 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: CHOATE, JOHN R G  
Address: 7143 SR 54 # 279  
City-St-Zip: NEW PORT RICHEY, FL 34653

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: CHOATE, JOHN R G  
Address: 777 MIDDLE RD  
City-St-Zip: PORTSMOUTH, NH 03801

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: JOHN R. G. CHOATE

P

04/21/2004

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date