

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000062734

FILED
Apr 23, 2004
Secretary of State

Entity Name: LINZEE ENTERPRISES OF TAMPA BAY INC.

Current Principal Place of Business:

3491 63RD AVE N
ST PETERSBURG, FL 33742

New Principal Place of Business:

Current Mailing Address:

P O BOX 183
LARGO, FL 33779

New Mailing Address:

FEI Number: 59-3650887 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCWILLIAMS, BEN W
269 6TH STREET, N.W.
LARGO, FL 33770 US

Name and Address of New Registered Agent:

MCWILLIAMS, BEN W
P O BOX 183
LARGO, FL 33779 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: BEN MC WILLIAMS

04/23/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MCWILLIAMS, BEN W
Address: 3491 63RD AVE N
City-St-Zip: ST PETERSBURG, FL 33742

Title: VP () Delete
Name: WALTER, HODOSKY
Address: P.O. BOX 183
City-St-Zip: LARGO, FL 33779

Title: VP (X) Delete
Name: JIMMIE, PEAT
Address: P.O. BOX 183
City-St-Zip: LARGO, FL 33779

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MCWILLIAMS, BEN W
Address: P O BOX 183
City-St-Zip: LARGO, FL 33779

Title: VP (X) Change () Addition
Name: JIMMIE, PEAT
Address: P.O. BOX 183
City-St-Zip: LARGO, FL 33779

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BEN MCWILLIAMS SR

P

04/23/2004

Electronic Signature of Signing Officer or Director

Date