

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000133168

Entity Name: C. C. BLACK ENTERPRISES, INC.

FILED
Feb 20, 2005
Secretary of State

Current Principal Place of Business:

18108 EMERALD BAY ST
TAMPA, FL 336473315

New Principal Place of Business:

5406 N. NEBRASKA AVENUE
TAMPA, FL 336047120 US

Current Mailing Address:

18108 EMERALD BAY ST
TAMPA, FL 336473315

New Mailing Address:

18108 EMERALD BAY ST
TAMPA, FL 336473315 US

FEI Number: 05-0593421

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BLACK, CONRAD A SR.
18108 EMERALD BAY ST
TAMPA, FL 336473315 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: C () Delete
Name: BLACK, CONRAD A SR.
Address: 18108 EMERALD BAY ST
City-St-Zip: TAMPA, FL 336473315

Title: VC () Delete
Name: MORRISON BLACK, CHARMAINE A
Address: 18108 EMERALD BAY ST
City-St-Zip: TAMPA, FL 336473315

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: BLACK, CONRAD A SR.
Address: 18108 EMERALD BAY ST
City-St-Zip: TAMPA, FL 336473315 US

Title: VP (X) Change () Addition
Name: BLACK, CHARMAINE A MORRISO
Address: 18108 EMERALD BAY ST
City-St-Zip: TAMPA, FL 336473315 US

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: CHARMAINE A. MORRISON BLACK

VP

02/20/2005

Electronic Signature of Signing Officer or Director

Date