## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# L61083

-tit. Name: SENECA AVIATION INC

FILED Jan 12, 2004 Secretary of State

Entity Nan	IE: SENECA	AVIATION, INC.				
Current Principal Place of Business:			New Princi	New Principal Place of Business:		
22036 LAKI EUSTIS, FL	E SENECA RI . 32736	0				
Current Mailing Address:			New Mailin	New Mailing Address:		
22036 LAKI EUSTIS, FL	E SENECA RI . 32736	D				
FEI Number:	59-3006157	FEI Number Applied For() F	El Number Not Appli	cable ( ) Certificate of Status Desired ( )		
Name and	Address of C	Surrent Registered Agent:	Name and	Address of New Registered Agent:		
RILEY, SAN 22036 LAKI EUSTIS, FL	E SENECA RI	)				
The above in the State		submits this statement for the purp	oose of changing it	s registered office or registered agent, or both,		
SIGNATUR	E:					
	Electror	ic Signature of Registered Agent		Date		
Election Cam	paign Financin	g Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	VST ( ) RILEY, SANDR 22036 LAKE S EUSTIS, FL 32	ENECA RD	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	P ( ) RILEY, SANDR 22036 LAKE S EUSTIS, FL 32	ENECA RD	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	D ( ) RILEY, NICOLE 22036 LK SENI EUSTIS, FL 32	ECA RD	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	D ( ) RILEY, SANDR 22036 LK SENI EUSTIS, FL 32	ECA RD	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	( )	Delete	Title: Name: Address: City-St-Zip:	D ( ) Change (X) Addition RILEY, CASEY J 22036 LK SENECA RD EUSTIS, FL 32736		
Title: Name: Address: City-St-Zip:	( )	Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition RILEY, HOLLY L 22036 LK SENECA RD EUSTIS, FL 32736		

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: SANDY RILEY P 01/12/2004