


2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 358633 1. Entity Name JIM CRIST ENTERPRISES, INC.	
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Principal Place of Business 1040 SEMINOLE BLVD. LARGO, FL 34640	Mailing Address ACCT. OFFICE 1426 GULF TO BAY BLVD. SUITE C CLEARWATER, FL 33755
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DO NOT WRITE IN THIS SPACE

FILED
04-JAN-9 PM 1:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01052004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1426993	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

CRIST, J.G
1426 GULF-TO-BAY BLVD.
SUITE C
CLEARWATER, FL 33755

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CRIST, JAMES G 3124 TIFFANY DR BELLEAIR BEACH, FL 33786
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CRIST, GREGORY G 1701 PATLIN CIRCLE N. LARGO, FL 34640
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01/09/04--01035--006 **150.00

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:  **1/6/04 727-447-3822**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR