




**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 15, 2004 08:00 AM
Secretary of State

DOCUMENT # 577583 1. Entity Name BOUTWELL ENTERPRISES, INC.			
Principal Place of Business ROUTE #3 (HIGHWAY #89 FOUR (4) MILE SOUTH OF JAY, BOX 391 JAY, FL 32565		Mailing Address 3600 GREENWOOD ROAD JAY, FL 32565 US	
DO NOT WRITE IN THIS SPACE			
			
		01102004 No Chg-P CR2E034 (10/03)	
4. FEI Number 59-1839656		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BOUTWELL, BOBBY ALAN HIGHWAY 4 (POST OFFICE BOX 338 ONE MILE W. OF JAY ESTECH INC.BLDG. JAY, FL 32565		DO NOT WRITE IN THIS SPACE	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>			
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	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD BOUTWELL, BILLY RONALD 3600 GREENWOOD ROAD JAY, FL		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD BOUTWELL, DUPREE LAVON RT. 3, BOX 931 JAY, FL		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD BOUTWELL, BOBBY ALAN RT. 2. STATE RD 197 JAY, FL		
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  Billy Ronald Boutwell		1-12-04 850-675-621	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>	