2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 596817

Entity Name: L. D. STEWART ENTERPRISES, INC.

FILED Apr 26, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
Current Principal Place of Business:	New Principal Place of Business

7822 FRANCINE DR 1838 GUNN HWY

NEW PORT RICHEY, FL 346531100 US ODESSA, FL 33556 US

Current Mailing Address: New Mailing Address:

7822 FRANCINE DR 1838 GUNN HWY

STE 101-102 ODESSA, FL 33556 US

NEW PORT RICHEY, FL 346531100 US

FEI Number: 59-1879935 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PATEL, SANDIP I 3105 W WATERS AVE STE 315 TAMPA, FL 33614 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ST () Delete Title: ST (X) Change () Addition

 Name:
 STEWART, JUANITA A,
 Name:
 STEWART, JUANITA A,

 Address:
 7822 FRANCINE DR
 Address:
 1838 GUNN HWY

 City-St-Zip:
 NEW PORT RICHEY, FL 34653
 City-St-Zip:
 ODESSA, FL 33556

Title: P () Delete Title: P (X) Change () Addition

 Name:
 STEWART, LYNN D,
 Name:
 STEWART, LYNN D,

 Address:
 7822 FRANCINE DR
 Address:
 1838 GUNN HWY

 City-St-Zip:
 NEW PORT RICHEY, FL 34653
 City-St-Zip:
 ODESSA, FL 33556

Title: V () Delete Title: V (X) Change () Addition

 Name:
 STEWART, MICHAEL D
 Name:
 STEWART, MICHAEL D

 Address:
 7822 FRANCINE DR
 Address:
 1838 GUNN HWY

 City-St-Zip:
 NEW PORT RICHEY, FL 34653
 City-St-Zip:
 ODESSA, FL 33556

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: MICHAEL STEWART V 04/26/2005