


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

<b>DOCUMENT # 597592</b> 1. Entity Name LYN ST. JAMES ENTERPRISES, INC.	
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Principal Place of Business* 3127 W INTERNATIONAL BLVD DAYTONA BEACH, FL 32114 US	Mailing Address 3127 W INTERNATIONAL BLVD DAYTONA BEACH, FL 32114 US
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**DO NOT WRITE IN THIS SPACE**

**FILED**  
04 OCT 25 AM 10:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



10252004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1963817	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent ST. JAMES, LYN 3127 W INTERNATIONAL BLVD DAYTONA BEACH, FL 32114
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**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

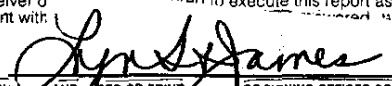
<b>FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD ST. JAMES, LYN 3127 W INTERNATIONAL BLVD DAYTONA BEACH, FL 32114
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TURNER, DEBRA 7565 OCEANLINE DR. INDIANAPOLIS, IN 46214
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

600042372896  
11/02/04--01011--001 \*\*550.00

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 assignee of the corporation; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with:

SIGNATURE:  **10-20-04** **317-319-0760**  
SIGNATURE AND PRINTED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

*T. Lewis*