

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 608339

FILED
Mar 11, 2004
Secretary of State

Entity Name: SOULE MARINE ENTERPRISES, INC.

Current Principal Place of Business:

1313 N. PACE BLVD.
PO BOX 17627
PENSACOLA, FL 32522

New Principal Place of Business:

Current Mailing Address:

1313 N. PACE BLVD.
PO BOX 17627
PENSACOLA, FL 32522

New Mailing Address:

FEI Number: 59-1884372 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOULE, JOHN FAYETTE
1313 N. PACE BLVD.
PENSACOLA, FL 32505 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: SOULE, JOHN FAYETTE,
Address: 435 CREARY ST
City-St-Zip: PENSACOLA, FL

Title: VP () Delete
Name: SOULE, SUSAN W,
Address: 435 CREARY ST
City-St-Zip: PENSACOLA, FL

Title: VPD () Delete
Name: SOULE, OLIVER,
Address: 112 MOON RAKER DR
City-St-Zip: SLIDELL, LA

Title: T () Delete
Name: MARTIN, D. CARROLL,
Address: 1512 JOHN CARROLL DRIVE
City-St-Zip: PENSACOLA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JOHN F. SOULE

PD

03/11/2004

Electronic Signature of Signing Officer or Director

_____ Date