## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 667451** 

Entity Name: E. II. A., INC.

FILED Jan 24, 2004 Secretary of State

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

2020 S COMBEE #12 1629 SHADY LN

LAKELAND, FL 33801 LAKE WALES, FL 33898

Current Mailing Address: New Mailing Address:

P.O. BOX 1158 1629 SHADY LN

EATON PARK, FL 338401158 LAKE WALES, FL 33898

FEI Number: 59-2936160 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:

AMRHEIN, EUGENE

1629 SHADY LANE DRIVE

LAKE WALES, FL 33853 US

AMRHEIN, EUGENE

1629 SHADY LANE DRIVE

LAKE WALES, FL 33898 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: EUGENE AMRHEIN 01/24/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition Name: AMRHEIN, EUGENE P (X) Change ( ) Addition

 Address:
 1629 SHADY LAKE DR
 Address:
 1629 SHADY LAKE DR

 City-St-Zip:
 LAKE WALES, FL 33853
 City-St-Zip:
 LAKE WALES, FL 33898

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

 Name:
 AMRHEIN, PAT S
 Name:
 AMRHEIN, PAT S

 Address:
 1629 SHADY LAKE DR
 Address:
 1629 SHADY LAKE DR

 City-St-Zip:
 LAKE WALES, FL 33853
 City-St-Zip:
 LAKE WALES, FL 33898

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: EUGENE AMRHEIN P 01/24/2004