

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 91024 025 ***150.00

DOCUMENT # F03412 1. Entity Name JOHN H. TALTON ENTERPRISES, INC.					
Principal Place of Business 7 WEST LAUREL STREET 7-W LAUREL ST. APOPKA, FL 32703 US			Mailing Address RUDEINS S. TALTON 7-W LAUREL ST APOPKA, FL 32703 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
BOWDOIN, DOUGLAS 255 S. ORANGE AVE. SUITE 800 ORLANDO, FL 32801			Name Street Address (P.O. Box Number is Not Acceptable) City		
			FL Zip Code		
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: <u>Marie Ann Talton DSTC</u> DATE: <u>4/28/04</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	DPCE <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	RUDEINS, TALTON		NAME		
STREET ADDRESS	7 WEST LAUREL ST.		STREET ADDRESS		
CITY-ST-ZIP	APOPKA, FL		CITY-ST-ZIP		
TITLE	DVPC <input type="checkbox"/> Delete		TITLE	DVPC <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	TALTON, JOHN H JR		NAME	TALTON JOHN H JR	
STREET ADDRESS	316-A MAPLE DR.		STREET ADDRESS	316 A MAPLE DR	
CITY-ST-ZIP	VIDALE, GA 30474		CITY-ST-ZIP	VIDALIA, GA 30474	
TITLE	DSTC <input type="checkbox"/> Delete		TITLE		
NAME	TALTON, MARIE A		NAME		
STREET ADDRESS	1313 LAKE ORANGE RD.		STREET ADDRESS		
CITY-ST-ZIP	HILLSBOROUGH, NC 27278		CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	Assistant to STC <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME			NAME	JUDITH P. TALTON	
STREET ADDRESS			STREET ADDRESS	316 A MAPLE DRIVE	
CITY-ST-ZIP			CITY-ST-ZIP	VIDALIA, GA 30474	
TITLE	<input type="checkbox"/> Delete		TITLE	Assistant to STC <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME			NAME	ROBERT A. LEE	
STREET ADDRESS			STREET ADDRESS	1313 Lake Orange Rd	
CITY-ST-ZIP			CITY-ST-ZIP	Hillsborough, NC 27278	
TITLE	<input type="checkbox"/> Delete		TITLE		
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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)(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 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: <u>Marie Ann Talton DSTC</u> <u>MARIE Ann Talton</u> <u>4/28/04</u> <u>919-732-2790</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

94081876



04272004 Chg-P CR2E034 (10/03)

4. FEI Number **59-2032075** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

FL Zip Code

4/28/04

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

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CITY-ST-ZIP	APOPKA, FL	
TITLE	DVPC <input type="checkbox"/> Delete	
NAME	TALTON, JOHN H JR	
STREET ADDRESS	316-A MAPLE DR.	
CITY-ST-ZIP	VIDALE, GA 30474	
TITLE	DSTC <input type="checkbox"/> Delete	
NAME	TALTON, MARIE A	
STREET ADDRESS	1313 LAKE ORANGE RD.	
CITY-ST-ZIP	HILLSBOROUGH, NC 27278	
TITLE	<input type="checkbox"/> Delete	
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete	
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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TITLE	DVPC <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
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CITY-ST-ZIP	VIDALIA, GA 30474	
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STREET ADDRESS	1313 Lake Orange Rd	
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STREET ADDRESS		
CITY-ST-ZIP		

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Marie Ann Talton DSTC
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #