

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000003551

Entity Name: PLUS ENTERPRISES, INC., OF SC

FILED  
Apr 15, 2005  
Secretary of State

**Current Principal Place of Business:**

3184 OLD NELSON ROAD, UNIT 4  
CONWAY, SC 295262532

**New Principal Place of Business:**

**Current Mailing Address:**

3184 OLD NELSON ROAD, UNIT 4  
CONWAY, SC 295262532

**New Mailing Address:**

FEI Number: 57-0750236      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GAUSE, MARGARET C  
144 PARKLAND DRIVE  
LAKE PLACID, FL 338529509 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: P ( ) Delete  
Name: GAUSE, PAUL D JR  
Address: 3188 OLD NELSON ROAD  
City-St-Zip: CONWAY, SC 295262532

Title: VPGA ( ) Delete  
Name: USE, PAUL D III  
Address: 2139 WOODLAWN DRIVE  
City-St-Zip: CONWAY, SC 295267709

Title: S ( ) Delete  
Name: GAUSE, JAMES N  
Address: 3188 OLD NELSON ROAD  
City-St-Zip: CONWAY, SC 295262532

Title: T ( ) Delete  
Name: GAUSE, ANGELA L  
Address: 1908 HAPPY CREEK ROAD  
City-St-Zip: SEYMOUR, TN 378655404

**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 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: PAUL D GAUSE JR

P

04/15/2005

Electronic Signature of Signing Officer or Director

Date