2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000000307

FILED
Jul 01, 2004
Secretary of State

Entity Name: C.L. BURKS & ASSOCIATES, INC.

Current Principal Place of Business:

1845 MACARTHUR BOULEVARD
ATLANTA, GA 30318

New Principal Place of Business:

Current Mailing Address:

1845 MACARTHUR BOULEVARD
ATLANTA, GA 30318

New Mailing Address:

FEI Number: 58-2207505 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:	S	( ) Delete
Name:	BURKS, CHARLES L	
Address:	1845 MACARTHUR BLVD	
City-St-Zip:	ATLANTA, GA 30318	
Title:	VP	( ) Delete
Name:	KRUER, ROBERT J	
Address:	1845 MACARTHUR BLVD	
City-St-Zip:	ATLANTA, GA 30318	
Title:	CEO	( ) Delete
Name:	BURKS, CHARLES L	
Address:	1845 MACARTHUR BLVD	
City-St-Zip:	ATLANTA, GA 30318	
Title:	VP	(X) Delete
Name:	DYE, DAVID	
Address:	1845 MACARTHUR BLDV	
City-St-Zip:	ATLANTA, GA 30318	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	VP	(X) Change ( ) Addition
Name:	DYE, DAVID	
Address:	1845 MACARTHUR BLVD	
City-St-Zip:	ATLANTA, GA 30318	
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: CHARLES L BURKS CEO 07/01/2004
Electronic Signature of Signing Officer or Director Date