## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F98000006499

FILED Jul 07, 2004 Secretary of State

Entity Name: AAAAA ENTERPRISES, INC.	
Current Principal Place of Business:	New Principal Place of Business:
7348 NC HWY 222 NORTH STANTONSBURG, NC 27883	7348 NC HWY 222 EAST STANTONSBURG, NC 27883
Current Mailing Address:	New Mailing Address:
7348 NC HWY 222 NORTH STANTONSBURG, NC 27883	7348 NC HWY 222 EAST STANTONSBURG, NC 27883
FEI Number: 56-2030270 FEI Number Applied For ( )	El Number Not Applicable ( ) Certificate of Status Desired ( )
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
TREVOR, JEAN L 380 N.W. DEARMAN STREET PORT ST. LUCIE, FL 34983 US	
The above named entity submits this statement for the purpo in the State of Florida.	ose of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Registered Agent	Date
Election Campaign Financing Trust Fund Contribution ( ).	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: P () Delete Name: CADWALLADER, EDITH P	Title: P (X) Change ( ) Addition  Name: CADWALLADER, EDITH P

City-St-Zip: STANTONSBURG, NC 27883

() Delete CADWALLADER, ROBERT B Name: Address: 7348 NC HWY 222 NORTH STANTONSBURG, NC 27883 City-St-Zip:

Title: ( ) Delete Name: TREVOR, JEAN L

Address: 380 N.W. DEARMAN STREET City-St-Zip: PORT ST.LUCIE, FL 34983

City-St-Zip: STANTONSBURG, NC 27883 Title: (X) Change ( ) Addition CADWALLADER, ROBERT B Name: Address: 7348 NC HWY 222 EAST

Title: () Change () Addition

STANTONSBURG, NC 27883

Name: Address: City-St-Zip:

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: ROBERT B. CADWALLADER 07/07/2004 ST