



**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 12, 2004 08:00 AM
Secretary of State

DOCUMENT # G80252																																										
1. Entity Name CHARLES BRYANT ENTERPRISES, INCORPORATED																																										
Principal Place of Business 2700 WHISPERWOOD LN PANAMA CITY, FL 32405	Mailing Address 2700 WHISPERWOOD LN PANAMA CITY, FL 32405																																									
DO NOT WRITE IN THIS SPACE		 03162004 No Chg-P CR2E034 (10/03) <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="padding: 2px;">4. FEI Number 59-2371085</td><td style="padding: 2px;">Applied For Not Applicable</td></tr><tr><td colspan="2" style="padding: 2px;">5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required</td></tr></table>	4. FEI Number 59-2371085	Applied For Not Applicable	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																					
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6. Name and Address of Current Registered Agent BRYANT, CHARLES 2700 WHISPERWOOD LN. PANAMA CITY, FL 32405		DO NOT WRITE IN THIS SPACE																																								
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</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 U00000108553 04/12/04-80008-005 150.00																																								
10. OFFICERS AND DIRECTORS <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 15%; padding: 2px;">TITLE</td><td style="padding: 2px;">P</td></tr><tr><td style="padding: 2px;">NAME</td><td style="padding: 2px;">BRYANT, CHARLES</td></tr><tr><td style="padding: 2px;">STREET ADDRESS</td><td style="padding: 2px;">202 N. PALO ALTO AVENUE</td></tr><tr><td style="padding: 2px;">CITY-ST-ZIP</td><td style="padding: 2px;">PANAMA CITY, FL</td></tr><tr><td style="padding: 2px;">TITLE</td><td style="padding: 2px;">T</td></tr><tr><td style="padding: 2px;">NAME</td><td style="padding: 2px;">BRYANT, CAROLYN G.</td></tr><tr><td style="padding: 2px;">STREET ADDRESS</td><td style="padding: 2px;">202 N. PALO ALTO AVENUE</td></tr><tr><td style="padding: 2px;">CITY-ST-ZIP</td><td style="padding: 2px;">PANAMA CITY, FL</td></tr><tr><td style="padding: 2px;">TITLE</td><td style="padding: 2px;"></td></tr><tr><td style="padding: 2px;">NAME</td><td style="padding: 2px;"></td></tr><tr><td style="padding: 2px;">STREET ADDRESS</td><td style="padding: 2px;"></td></tr><tr><td style="padding: 2px;">CITY-ST-ZIP</td><td style="padding: 2px;"></td></tr><tr><td style="padding: 2px;">TITLE</td><td style="padding: 2px;"></td></tr><tr><td style="padding: 2px;">NAME</td><td style="padding: 2px;"></td></tr><tr><td style="padding: 2px;">STREET ADDRESS</td><td style="padding: 2px;"></td></tr><tr><td style="padding: 2px;">CITY-ST-ZIP</td><td style="padding: 2px;"></td></tr><tr><td style="padding: 2px;">TITLE</td><td style="padding: 2px;"></td></tr><tr><td style="padding: 2px;">NAME</td><td style="padding: 2px;"></td></tr><tr><td style="padding: 2px;">STREET ADDRESS</td><td style="padding: 2px;"></td></tr><tr><td style="padding: 2px;">CITY-ST-ZIP</td><td style="padding: 2px;"></td></tr></table>		TITLE	P	NAME	BRYANT, CHARLES	STREET ADDRESS	202 N. PALO ALTO AVENUE	CITY-ST-ZIP	PANAMA CITY, FL	TITLE	T	NAME	BRYANT, CAROLYN G.	STREET ADDRESS	202 N. PALO ALTO AVENUE	CITY-ST-ZIP	PANAMA CITY, FL	TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		DO NOT WRITE IN THIS SPACE
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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: <i>Carolyn G. Bryant</i> <i>Carolyn G. Bryant</i> 4904 850-785-3604 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																										