

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L27097

FILED
Mar 31, 2005
Secretary of State

Entity Name: VAN ZANT ENTERPRISES, INC.

Current Principal Place of Business:

% LEON C. VAN ZANT
6008 MINNEOLA STREET
PANAMA CITY, FL 32404

New Principal Place of Business:

% LEON C. VAN ZANT
4522 BAYWOOD DRIVE
LYNN HAVEN, FL 32444

Current Mailing Address:

% LEON C. VAN ZANT
6008 MINNEOLA STREET
PANAMA CITY, FL 32404

New Mailing Address:

% LEON C. VAN ZANT
P.O. BOX 1689
LYNN HAVEN, FL 32444

FEI Number: 59-2974728

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VAN ZANT, LEON C
6008 MINNEOLA STREET
PANAMA CITY, FL 32404 US

Name and Address of New Registered Agent:

VAN ZANT, LEON C
4522 BAYWOOD DRIVE
LYNN HAVEN, FL 32444 US

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:

03/31/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTSC () Delete
Name: VAN ZANT, LEON C.,
Address: 6008 MINNEOLA STREET
City-St-Zip: PANAMA CITY, FL

Title: V () Delete
Name: VAN ZANT, TIMOTHY L.
Address: 135 HEATHER DR
City-St-Zip: PANAMA CITY BCH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSC (X) Change () Addition
Name: VAN ZANT, LEON C.,
Address: 4522 BAYWOOD DRIVE
City-St-Zip: LYNN HAVEN, FL 32444

Title: V (X) Change () Addition
Name: VAN ZANT, TIMOTHY L.
Address: 2572 GREENHEAD ROAD
City-St-Zip: CHIPLEY, FL 32428

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: LEON C. VAN ZANT

PTSC

03/31/2005

Electronic Signature of Signing Officer or Director

Date