

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L40886

FILED  
Jan 13, 2004  
Secretary of State

Entity Name: SHALIMAR ENTERPRISES, INC.

**Current Principal Place of Business:**

70 3RD ST  
SHALIMAR, FL 32579 US

**New Principal Place of Business:**

**Current Mailing Address:**

6179 W. DOGWOOD DRIVE  
CRESTVIEW, FL 32536 US

**New Mailing Address:**

FEI Number: 59-2990728

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BOWERS, DANIEL A  
6179 DOGWOOD DR W  
CRESTVIEW, FL 32536 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: D ( ) Delete  
Name: GRONNING, JOHN,  
Address: 5 WARWICK DR.  
City-St-Zip: SHALIMAR, FL 32579

Title: P ( ) Delete  
Name: BOWERS, DANIEL A., S. R.  
Address: 6179 W. DOGWOOD DR.  
City-St-Zip: CRESTVIEW, FL 32536

Title: D ( ) Delete  
Name: GRONNING, TRUDI  
Address: 5 WARWICK DRIVE  
City-St-Zip: SHALIMAR, FL 32579

Title: D ( ) Delete  
Name: BOWERS, SHERRY  
Address: 6179 W. DOGWOOD DRIVE  
City-St-Zip: CRESTVIEW, FL 32536

**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 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: DANIEL A. BOWERS, SR.

P

01/13/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date