

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L72552

FILED
Apr 24, 2004
Secretary of State

Entity Name: ENTERPRISE TRAVEL SERVICE, INC.

Current Principal Place of Business:

7221 FOREST OAKS BLVD
SPRING HILL, FL 34606 US

New Principal Place of Business:

Current Mailing Address:

7221 FOREST OAKS BLVD
SPRING HILL, FL 34606 US

New Mailing Address:

FEI Number: 59-3010559

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKUSE, LAUREN L P
7221 FOREST OAKS BLVD.
SPRING HILL, FL 34606 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: P () Delete
Name: SKUSE, LAUREN L.,
Address: 12242 MONARCO LANE
City-St-Zip: SPRING HILL, FL

Title: VP () Delete
Name: SKUSE, LAWRENCE C.,
Address: 450 LITTLE PATH RD
City-St-Zip: DES PLAINES, IL

Title: ST () Delete
Name: SKUSE, SHARON C.,
Address: 450 LITTLE PATH RD
City-St-Zip: DES PLAINES, IL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SKUSE, LAUREN L MISS
Address: 12242 MONARCO LANE
City-St-Zip: SPRING HILL, FL 34609 US

Title: VP (X) Change () Addition
Name: SKUSE, LAWRENCE C MR
Address: 450 LITTLE PATH RD
City-St-Zip: DES PLAINES, IL 60016 US

Title: SE (X) Change () Addition
Name: SKUSE, SHARON C MRS
Address: 450 LITTLE PATH RD
City-St-Zip: DES PLAINES, IL 60016 US

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: LAUREN L SKUSE

MISS

04/24/2004

Electronic Signature of Signing Officer or Director

Date