


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 10, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L73528</b> 1. Entity Name DAUPHIN FARMS, INC.	
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Principal Place of Business 11841 OLD BICYCLE RD. PANAMA CITY, FL 32404	Mailing Address 1538 PRIMROSE LANE PANAMA CITY, FL 32404 US
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**DO NOT WRITE IN THIS SPACE**



02052004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3051059	Applied For Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent  DAUPHIN, JAMES M. 1538 PRIMROSE LANE PANAMA CITY PANAMA CITY FL, FL 32404-2796
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**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 _____ <small>Signature, typed or printed name of registered agent and file if applicable.</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST DAUPHIN, SUE C 1538 PRIMROSE LANE PANAMA CITY, FL 324042796
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P DAUPHIN, JAMES M 1538 PRIMROSE LANE PANAMA CITY, FL 324042796
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D DAUPHIN, SUE C 1538 PRIMROSE LANE PANAMA CITY, FL 324042796
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02/11/04-80033-015 158.75

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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)(f), 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.

<b>SIGNATURE:</b> <u>James M. Dauphin</u> <u>JAMES M DAUPHIN PRES.</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<u>2-7-04</u> <small>Date</small>	<u>8508713072</u> <small>Daytime Phone #</small>
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