2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2004
Secretary of State

DOCUMENT# N03000003739

Entity Name: FLYING FOR JOY, INC.

Current Principal Place of Business:

5236 PRESIDENTIAL ST.
SEFFNER, FL 33584

New Principal Place of Business:

9409 GOLDEN ROD ROAD
#B
THONOTOSASSA, FL 33592

Current Mailing Address:

5236 PRESIDENTIAL ST.
SEFFNER, FL 33584

New Mailing Address:

P.O. BOX 886
MANGO, FL 33550

FEI Number: 51-0442725 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

STUTTS, CLYDE H
5236 PRESIDENTIAL ST.
SEFFNER, FL 33584 US

Name and Address of New Registered Agent:

STUTTS, CLYDE H
P.O. BOX 886
MANGO, FL 33550 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: CLYDE H. STUTTS 05/04/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: STUTTS, CLYDE H
Address: 703 PROVIDENCE TRACE CR., #103
City-St-Zip: BRANDON, FL 33511

Title: V ( ) Delete
Name: ATKINS, ROB
Address: 1402 ASTOR COMMONS PLACE, #101
City-St-Zip: BRANDON, FL 33510

Title: ST ( ) Delete
Name: SCAGLIONE, DEBBIE
Address: P.O. BOX 886
City-St-Zip: MANGO, FL 33550

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change ( ) Addition
Name: SCAGLIONE, DEBBIE
Address: 5236 PRESIDENTIAL STREET
City-St-Zip: SEFFNER, FL 33584

Title: BD (X) Change ( ) Addition
Name: THOMAS, WAYMON
Address: P.O. BOX 280
City-St-Zip: DOVER, FL 33527

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CLYDE H. STUTTS P 05/04/2004
Electronic Signature of Signing Officer or Director Date