

DOCUMENT # N98000000460					
1. Entity Name ENTERPRISE CORAL SPRINGS, INC.					
Principal Place of Business 11805 HERON BAY BLVD. POMPANO BEACH, FL 33076			Mailing Address 11805 HERON BAY BLVD. POMPANO BEACH, FL 33076		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
				Country	
6. Name and Address of Current Registered Agent					
CAWLEY, PAUL F 11805 HERON BAY BLVD. POMPANO BEACH, FL 33076					Name
					Street Address
					City
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent.					
SIGNATURE <u>Paul Cawley</u>					
<small>Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required.)</small>					
Filing Fee is \$61.25 Due by May 1, 2006				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VC DITOCOCO, MIKE 11030 WILES ROAD SUITE 101 CORAL SPRINGS, FL 33076	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CD MOYLE, BERNARD T ESQ 1875 SW 4 AVENUE DELRAY BEACH, FL 33444	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD WEBER, TOM 3111 N UNIVERSITY DR., #725 CORAL SPRINGS, FL 33065	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD BROWN-BURTON, LORNA 1041 SOUTHEAST 17 STREET FORT LAUDERDALE, FL 33316	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete			
11.					
TITLE NAME STREET ADDRESS CITY - ST - ZIP		CD JOB 3111 COR			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		311 C			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained indicated on this report or supplemental report is true and accurate and that my signature shall have the effect of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 61 changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Thomas P Weber</u>					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					