2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000002782

Entity Name: HINTON BUSINESS ENTERPRISES, INC.

FILED May 11, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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513 LAKE SADDLEBAGS DR. LAKE PLACID, FL 33852 US

Current Mailing Address: New Mailing Address:

PO BOX 328 LAKE PLACID, FL 338620328 US

FEI Number: 65-0981628 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LAWRENCE, F PARKER 3720 NW 43RD ST STE 101 GAINESVILLE, FL 32606

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: EV () Delete Title: EV (X) Change () Addition

 Name:
 LAWRENCE, MALA H
 Name:
 LAWRENCE, MALA H

 Address:
 72 TOWER ST STE 4
 Address:
 5415 LAKE HOWELL RD, STE 197

 City-St-Zip:
 LAKE PLACID, FL 33852
 City-St-Zip:
 WINTER PARK, FL 32792

Title: S () Delete Title: S (X) Change () Addition Name: LAWRENCE, MALA H Name: LAWRENCE, MALA H

 Address:
 72 TOWER ST STE 4
 Address:
 5415 LAKE HOWELL RD, STE 19

 City-St-Zip:
 LAKE PLACID, FL 33852
 City-St-Zip:
 WINTER PARK, FL 32792

Title: T () Delete Title: T (X) Change () Addition Name: HINTON, STEVEN W Name: HINTON, STEVEN W

Address: 72 TOWER ST STE 4 Address: 5415 LAKE HOWELL RD, STE 197
City-St-Zip: LAKE PLACID, FL 33852 City-St-Zip: WINTER PARK, FL 32792

Title: P () Delete Title: P (X) Change () Addition Name: HINTON, STEVEN W

Address: 72 TOWER ST STE Address: 5415 LAKE HOWELL RD, STE 197 City-St-Zip: LAKE PLACID, FL 33852 City-St-Zip: WINTER PARK, FL 32792

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: STEVEN W. HINTON PRES 05/11/2004