2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000009255

Entity Name: HELTON ENTERPRISES, INC.

FILED Apr 19, 2002 8:00 AM Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
--------------------------------------	----------------------------------

9172 BLIND PASS ROAD 9172 BLIND PASS ROAD

ST. PETE BEACH, FL 33706 ST. PETE BEACH, FL 337061303 US

Current Mailing Address: New Mailing Address:

9172 BLIND PASS ROAD 9172 BLIND PASS ROAD

ST. PETE BEACH, FL 337061303 US

FEI Number: 59-3629102 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:

HECTON, JAMES R
9172 BLIND PASS ROAD
HELTON, JAMES R
9172 BLIND PASS ROAD
9172 BLIND PASS ROAD

SAINT PETERSBURG, FL 33706 US ST. PETE BEACH, FL 337061303 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: JAMES R. HELTON 04/19/2002

Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: () Change () Addition

 Name:
 HELTON, JAMES R
 Name:

 Address:
 9172 BLIND PASS ROAD
 Address:

 City-St-Zip:
 ST. PETE BEACH, FL 33706
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 HELTON, E. MAUREEN
 Name:

 Address:
 9172 BLIND PASS ROAD
 Address:

 City-St-Zip:
 ST. PETE BEACH, FL 33706
 City-St-Zip:

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: JAMES R. HELTON D 04/19/2002