2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004
Secretary of State

DOCUMENT# P00000039860

Entity Name: LIBERTY ENTERPRISES, INC.

Current Principal Place of Business:

5920 LEXINGTON AVE.
MELROSE, FL 32666

New Principal Place of Business:

300 B SR 21 N
MELROSE, FL 32666

Current Mailing Address:

P.O. BOX 464
MELROSE, FL 326660464

New Mailing Address:

P.O. BOX 1995
KEYSTONE HEIGHTS, FL 326561995

FEI Number: 59-3662478 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LUCAS, S. THOMAS
5920 LEXINGTON AVE.
MELROSE, FL 32666

Name and Address of New Registered Agent:

LUCAS, S. THOMAS
621 HEBRON AVENUE
KEYSTONE HEIGHTS, FL 32656

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: S. THOMAS LUCAS 04/29/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: LUCAS, S. THOMAS
Address: 5920 LEXINGTON AVE.
City-St-Zip: MELROSE, FL 32666 US

Title: PRES ( ) Delete
Name: LUCAS, SUSAN W
Address: 5920 LEXINGTON AVE.
City-St-Zip: MELROSE, FL 32666 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: LUCAS, S. THOMAS
Address: 621 HEBRON AVENUE
City-St-Zip: KEYSTONE HEIGHTS, FL 32656 US

Title: PRES (X) Change ( ) Addition
Name: LUCAS, SUSAN W
Address: 621 HEBRON AVENUE
City-St-Zip: KEYSTONE HEIGHTS, FL 32656 US

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: S. T. LUCAS VP 04/29/2004
Electronic Signature of Signing Officer or Director Date