2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000090440

Entity Name: MCAFEE-TOWE ENTERPRISES, INC.

FILED Apr 27, 2004 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:		
1004 PARK AVE. ORANGE PARK, FL 32073	3			
Current Mailing Address:		New Mailing Address:	New Mailing Address:	
1004 PARK AVE. ORANGE PARK, FL 32073				
FEI Number: 59-3673317	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	

INTREPID REGISTERED AGENT SERVICES, LLC 225 WATER STREET, SUITE 2020 JACKSONVILLE, FL 32202 US

Name and Address of Current Registered Agent:

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:

Name and Address of New Registered Agent:

Title: () Delete Title: (X) Change () Addition MCAFEE, ROBERT S MCAFEE, ROBERT S Name: Name: 1008 PARK AVE. 1008 PARK AVE Address: Address: City-St-Zip: ORANGE PARK, FL 32073 City-St-Zip: ORANGE PARK, FL 32073

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

 Name:
 MCAFEE, ANN C
 Name:

 Address:
 1008 PARK AVE.
 Address:

 City-St-Zip:
 ORANGE PARK, FL 32073
 City-St-Zip:

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

 Name:
 TOWE, SCOTT
 Name:
 TOWE, SCOTT

 Address:
 1008 PARK AVE.
 Address:
 1008 PARK AVE.

City-St-Zip: ORANGE PARK, FL 32073 City-St-Zip: ORANGE PARK, FL 32073

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: ROBERT S. MCAFEE DP 04/27/2004