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2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2005 08:00 AM
Secretary of State

DOCUMENT # P00000098825 1. Entity Name E. BURDICK ENTERPRISES, INC.		
Principal Place of Business REVERE GUN RANGE 601 NE 28TH ST POMPANO BEACH, FL 33064	Mailing Address REVERE GUN RANGE 601 NE 28TH ST POMPANO BEACH, FL 33064	
DO NOT WRITE IN THIS SPACE		
5. Name and Address of Current Registered Agent Stephen Verbit 235 N. University Drive Pembroke Pines, FL 33024		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>Stephen Verbit</i></u> STEPHEN VERBIT <u>3-15-05</u> Signature of person or firm named as registered agent and which applies. (NOTE: Registered Agent signature required when reinstating) DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		1000000270602 03/21/05-80013-019 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BURDICK, ELLEN 220 SW 3RD PLACE DANIA, FL 33004	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BURDICK, SEYMOUR 5111 SW 101 AVE COOPER CITY, FL 33328	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <u><i>Ellen Burdick</i></u> SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		<u>3/15/05</u> 954 942 377 DATE