


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 07, 2004 08:00 AM
Secretary of State

DOCUMENT # P01000069596

1. Entity Name
JEFFRIES ENTERPRISES, INC.



Principal Place of Business
**573 POCAHONTAS
FORT WALTON BEACH, FL 32547**

Mailing Address
**P.O. BOX 760
GENEVA, AL 36340-0706**

DO NOT WRITE IN THIS SPACE



04272004 No Chg-P CR2E034 (10/03)

4. FEI Number
63-1231673

Applied For
Not Applicable

5. Certificate of Status Dashed **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**ELLENBURG, LISA
1138 ENGLISH LN
WESTVILLE, FL 32484**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$850.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 may be Added to Fee**

U00000158251
05/07/04-80013-017 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JEFFRIES, STEVEN C 147 RAINBOW DRIVE FORT WALTON BEACH, FL 32548
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST JEFFRIES, WENDY 147 RAINBOW DRIVE FORT WALTON BEACH, FL 32548
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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)(f), 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 changed, or on an attachment with an address, with all other filers empowered.

SIGNATURE: Steve Jeffries **Steve Jeffries** 4-28-04 185099743874
SIGNATURE AND TYPED OR PRINTED NAME OF REPORTING OFFICER OR DIRECTOR Date Page One Page 3