


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 03, 2004 8:00 am**  
**Secretary of State**

05-03-2004 91254 029 \*\*\*150.00

|   |  |   |   |  |  |
|---|--|---|---|--|--|
| <b>DOCUMENT # P01000081944</b><br>1. Entity Name<br><b>R.V.L. ENTERPRISES, INC.</b>   |  |   |   |   |  |
| Principal Place of Business<br><b>7535 BLACKJACK CIRCLE<br/>NAVARRE, FL 32566</b>   |  |   | Mailing Address<br><b>7535 BLACKJACK CIRCLE<br/>NAVARRE, FL 32566</b>   |  |  |
| 2. Principal Place of Business<br><b>2134 OAK STREAM AVE</b><br>Suite, Apt. #, etc.   |  | 3. Mailing Address<br><b>2134 OAK STREAM AVE</b><br>Suite, Apt. #, etc.   |   |  |  |
| City & State<br><b>PENSACOLA FL</b><br>Zip <b>32526</b> Country <b>US</b>   |  | City & State<br><b>PENSACOLA FL</b><br>Zip <b>32526</b> Country <b>US</b> |   | 4. FEI Number<br><b>59-3741273</b>   |  |
| 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>   |  |   |   | Applied For<br>Not Applicable  |  |
| 6. Name and Address of Current Registered Agent<br><br><b>LONG, ROY V<br/>7535 BLACKJACK CIRCLE<br/>NAVARRE, FL 32566</b>   |  |   | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br><b>2134 OAK STREAM AVE</b><br>City <b>PENSACOLA FL</b> Zip Code <b>32526</b> |  |  |
| 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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____  |  |   |   |  |  |
| <b>FILE NOW!!! FEE IS \$150.00<br/>After May 1, 2004 Fee will be \$550.00</b>   |  |   | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>  |  |  |
| <b>10. OFFICERS AND DIRECTORS</b>   |  |   | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>  |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP  | <b>P</b><br><b>LONG, ROY V</b><br><b>7535 BLACKJACK CIRCLE</b><br><b>NAVARRE, FL 32566</b> <input type="checkbox"/> Delete |   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition<br><b>2134 OAK STREAM AVE</b><br><b>PENSACOLA FL 32526</b> |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP  | <b>ST</b><br><b>LONG, SUE</b><br><b>7535 BLACKJACK CIRCLE</b><br><b>NAVARRE, FL 32566</b> <input type="checkbox"/> Delete  |   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition<br><b>2134 OAK STREAM AVE</b><br><b>PENSACOLA FL 32526</b> |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP  | <input type="checkbox"/> Delete  |   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition  |  |
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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)(i), 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. |  |   |   |  |  |
| <b>SIGNATURE: Roy V Long</b><br><b>ROY V. LONG</b>  |  |   | <b>4/30/04</b> <b>8509440429</b><br>Date Daytime Phone #  |  |  |