

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000060221

FILED
Apr 29, 2005
Secretary of State

Entity Name: CORNERSTONE ENTERPRISES 2002, INC.

Current Principal Place of Business:

P.O.BOX 517
OCOEE, FL 34761

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 517
OCOEE, FL 34761

New Mailing Address:

FEI Number: 01-0708518

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRAHAM, JAMES E
1324 VIC-KAY COURT
WINTER GARDEN, FL 34787 US

Name and Address of New Registered Agent:

GRAHAM, JAMES E
P.O. BOX 162121
ALTAMONTE SPRINGS, FL 32716 US

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: JAMES E GRAHAM

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GRAHAM, CAROLE E
Address: 1324 VIC-KAY COURT
City-St-Zip: WINTER GARDEN, FL 34787

Title: D () Delete
Name: GRAHAM, JAMES E
Address: 1324 VIC-KAY COURT
City-St-Zip: WINTER GARDEN, FL 34787

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GRAHAM, CAROLE E
Address: P.O. BOX 162121
City-St-Zip: ALTAMONTE SPRINGS, FL 32716

Title: D (X) Change () Addition
Name: GRAHAM, JAMES E
Address: P.O. BOX 162121
City-St-Zip: ALTAMONTE SPRINGS, FL 32716

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: CAROLE GRAHAM

D

04/29/2005

Electronic Signature of Signing Officer or Director

Date