

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000126737

FILED
Feb 26, 2004
Secretary of State

Entity Name: DOGWOOD MOUNTAIN ESTATES, INC.

Current Principal Place of Business:

626 HEATHER STONE DRIVE
MERRITT ISLAND, FL 32953

New Principal Place of Business:

Current Mailing Address:

626 HEATHER STONE DRIVE
MERRITT ISLAND, FL 32953

New Mailing Address:

P. O. BOX 540234
MERRITT ISLAND, FL 32954

FEI Number: 01-0771165

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALSTON, TOMMY R
2350 NORTH TROPICAL TRAIL
MERRITT ISLAND, FL 32953

Name and Address of New Registered Agent:

ALSTON, TOMMY R
626 HEATHER STONE DR.
MERRITT ISLAND, FL 32953

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:

02/26/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ALSTON, TOMMY R
Address: 2350 NORTH TROPICAL TRAIL
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D () Delete
Name: ALSTON, O. BRUCE
Address: 238 CHANDLER AVENUE UNIT 101
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: D () Delete
Name: THIEBUS, JOAN W
Address: 626 HEATHER STONE DRIVE
City-St-Zip: MERRITT ISLAND, FL 32953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ALSTON, TOMMY R
Address: 626 HEATHER STONE DR.
City-St-Zip: MERRITT ISLAND, FL 32953

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: ALSTON, JOAN W
Address: 626 HEATHER STONE DRIVE
City-St-Zip: MERRITT ISLAND, FL 32953

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: TOMMY R. ALSTON

PRES

02/26/2004

Electronic Signature of Signing Officer or Director

Date