

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000047961

FILED
Feb 28, 2005
Secretary of State

Entity Name: CROSLEY ENTERPRISES, INC.

Current Principal Place of Business:

1112 STONEHEDGE TRAIL LANE
ST. AUGUSTINE, FL 32092

New Principal Place of Business:

1040 EAGLE POINT DRIVE
ST. AUGUSTINE, FL 32092

Current Mailing Address:

1112 STONEHEDGE TRAIL LANE
ST. AUGUSTINE, FL 32092

New Mailing Address:

1040 EAGLE POINT DRIVE
ST. AUGUSTINE, FL 32092

FEI Number: 27-0056847

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CROSLEY, POWEL
1112 STONEHEDGE TRAIL LANE
ST. AUGUSTINE, FL 32092 US

Name and Address of New Registered Agent:

CROSLEY, POWEL
1040 EAGLE POINT DRIVE
ST. AUGUSTINE, FL 32092 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: POWEL CROSLEY

02/28/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CROSLEY, POWEL
Address: 1112 STONEHEDGE TRAIL LANE
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: D () Delete
Name: CROSLEY, MICHELLE
Address: 1112 STONEHEDGE TRAIL LANE
City-St-Zip: ST. AUGUSTINE, FL 32092

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CROSLEY, POWEL
Address: 1040 EAGLE POINT DRIVE
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: D (X) Change () Addition
Name: CROSLEY, MICHELLE
Address: 1040 EAGLE POINT DRIVE
City-St-Zip: ST. AUGUSTINE, FL 32092

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: POWEL CROSLEY

PRES

02/28/2005

Electronic Signature of Signing Officer or Director

Date