

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000054123

FILED
May 03, 2004
Secretary of State

Entity Name: CAPERNAUM PROPERTIES, INC.

Current Principal Place of Business:

725 SE PORT ST LUCIE BLVD STE 201
PORT ST LUCIE, FL 34984

New Principal Place of Business:

110 PARK AVENUE EAST
STE. B
INDIAN LAKE ESTATES, FL 33855 US

Current Mailing Address:

725 SE PORT ST LUCIE BLVD STE 201
PORT ST LUCIE, FL 34984

New Mailing Address:

P.O. BOX 7275
INDIAN LAKE ESTATES, FL 33855 US

FEI Number: 38-3697683

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BELL, DWIGHT W
361 SW MAJESTIC TERR
PORT ST LUCIE, FL 34984 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MCKEE, JIM
Address: 1705 28 AVE
City-St-Zip: VERO BEACH, FL 32960

Title: D () Delete
Name: WOLDMAN, MORRIS
Address: 2296 15 AVE SW
City-St-Zip: VERO BEACH, FL 32960

Title: ST () Delete
Name: BELL, DWIGHT W
Address: 361 SW MAJESTIC TERR
City-St-Zip: PORT ST LUCIE, FL 34984

Title: D () Delete
Name: WAY, JIM
Address: 6285 45 ST
City-St-Zip: VERO BEACH, FL 32967

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: TURNER, H. C
Address: 6560 NORTH 87TH STREET
City-St-Zip: WABASSO, FL 32970

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

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

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: DWIGHT W. BELL

ST

05/03/2004

Electronic Signature of Signing Officer or Director

Date