

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000115086

FILED
Jul 28, 2005
Secretary of State

Entity Name: VAN ROOYEN ENTERPRISES, INC.

Current Principal Place of Business:

1602 GILLETTE RD.
ZOLFO SPRINGS, FL 33890

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 53
AVON PARK, FL 338260053

New Mailing Address:

FEI Number: 20-0271302

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JAMES F. MCCOLLUM, P.L.
129 S COMMERCE AVE
SEBRING, FL 33870 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: D () Delete
Name: VAN ROOYEN, PETRUS H
Address: P.O. BOX 53
City-St-Zip: AVON PARK, FL 33825

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S () Change (X) Addition
Name: VAN ROOYEN, KARIN
Address: PO BOX 53
City-St-Zip: AVON PARK, FL 33826

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: PETRUS H VAN ROOYEN

D

07/28/2005

Electronic Signature of Signing Officer or Director

Date