2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000125045

Entity Name: C.J. CONTRACTORS, INC.

FILED Apr 12, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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P.O. BOX 1285

DELEON SPRINGS, FL 32130

P.O. BOX 1285

445 WHEELER ST

DELEON SPRINGS, FL 32130

Current Mailing Address: New Mailing Address:

P.O. BOX 1285 DELEON SPRINGS, FL 32130

FEI Number: 20-0413504 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ST. JOHN, CARROLL 445 WHEELER STREET DELEON SPRINGS, FL 32130 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: PRES () Change (X) Addition
Name: ST JOHN, CARROLL J PRES

Name: Name: ST JOHN, CARROLL J PRES
Address: Address: 445 WHEELER ST

City-St-Zip: City-St-Zip: DELEON SPRINGS, FL 32130

Title: () Delete Title: MRS () Change (X) Addition

 Name:
 Name:
 ST JOHN, FAYE E SEC

 Address:
 Address:
 445 WHEELER ST

 City-St-Zip:
 City-St-Zip:
 DELEON SPRINGS, FL 32130

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: FAYE ST JOHN SEC 04/12/2004