

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000148135

FILED
Jan 19, 2005
Secretary of State

Entity Name: JAMES SULLIVAN ENTERPRISES, INC.

Current Principal Place of Business:

138 EAGLE POINT BLVD.
AUBURNDALE, FL 33823

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 972
POLK CITY, FL 33868

New Mailing Address:

FEI Number: 20-0433374

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SULLIVAN, JAMES
6210 GREEN POND RD
POLK CITY, FL 33868 US

Name and Address of New Registered Agent:

SULLIVAN, JAMES
138 EAGLE POINT RD.
AUBURNDALE, FL 33823 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: JAMES SULLIVAN

01/19/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SULLIVAN, JAMES
Address: 6210 GREEN POND RD
City-St-Zip: POLK CITY, FL 33868

Title: D () Delete
Name: SULLIVAN, AMANDA
Address: 6210 GREEN POND RD
City-St-Zip: POLK CITY, FL 33868

Title: DVPO () Delete
Name: SULLIVAN, JOHN L JR.
Address: 8916 GOLDEN GATE BLVD.
City-St-Zip: POLK CITY, FL 33868

Title: DVPL () Delete
Name: PICKEN, BILLY
Address: 2144 HELWYN RD.
City-St-Zip: AUBURNDALE, FL 33823

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SULLIVAN, JAMES
Address: 138 EAGLE POINT BLVD.
City-St-Zip: AUBURNDALE, FL 33823

Title: D (X) Change () Addition
Name: SULLIVAN, AMANDA
Address: 138 EAGLE POINT BLVD.
City-St-Zip: AUBURNDALE, FL 33823

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: JAMES SULLIVAN

D

01/19/2005

Electronic Signature of Signing Officer or Director

Date