

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000049083

Entity Name: CHENEY ENTERPRISES, INC.

FILED
Feb 24, 2005
Secretary of State

Current Principal Place of Business:

2410 W. NINE MILE RD.
PENSACOLA, FL 32534

New Principal Place of Business:

Current Mailing Address:

2410 W. NINE MILE RD.
PENSACOLA, FL 32534

New Mailing Address:

FEI Number: 59-3199452

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHENEY, LAIN B
2410 W. NINE MILE RD.
PENSACOLA, FL 32534 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: CHENEY, FRANK A
Address: 2410 W. NINE MILE RD.
City-St-Zip: PENSACOLA, FL 32534

Title: DV () Delete
Name: CHENEY, SHAIN
Address: 2410 WEST NINE MILE ROAD
City-St-Zip: PENSACOLA, FL 32534

Title: DST () Delete
Name: PETERSON, LINDA
Address: 171 BOONE ST. 2088
City-St-Zip: PENSACOLA, FL 32505

Title: VP () Delete
Name: CHENEY, LAIN B
Address: 23539 LAWRENCE MOSLEY ROAD
City-St-Zip: ROBERTSDALE, AL 36567

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DV (X) Change () Addition
Name: CHENEY, SHAIN A
Address: 2410 WEST NINE MILE ROAD
City-St-Zip: PENSACOLA, FL 32534

Title: DST (X) Change () Addition
Name: PETERSON, LINDA S
Address: 2420 HWY 168
City-St-Zip: CENTURY, FL 32535

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

Title: M () Change (X) Addition
Name: NASSEF, NAMON A
Address: 11562 CLEAR CREEK DR
City-St-Zip: PENSACOLA, FL 32514

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: LINDA S PETERSON

DST

02/24/2005

Electronic Signature of Signing Officer or Director

Date