

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000059960

FILED
May 05, 2004
Secretary of State

Entity Name: M & M ENTERPRISES OF LAKE CITY, INC.

Current Principal Place of Business:

1592 U.S. 90 WEST
LAKE CITY, FL 32055

New Principal Place of Business:

Current Mailing Address:

1592 US 90 W
LAKE CITY, FL 32055 US

New Mailing Address:

FEI Number: 59-3194637

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOPKINS, JOHN S
10011 NW 50TH TERRACE
GAINESVILLE, FL 32653

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: TS () Delete
Name: HALE, ABBIGAIL S
Address: RT 17 BOX 1811
City-St-Zip: LAKE CITY, FL 32055

Title: V () Delete
Name: WALTRIP, GREGORY S
Address: RT 15 BOX 3092
City-St-Zip: LAKE CITY, FL 32024

Title: P () Delete
Name: HOPKINS, JOHN S
Address: 10011 NW 50TH TERRACE
City-St-Zip: GAINESVILLE, FL 32653

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TS (X) Change () Addition
Name: HALE, ABBIGAIL S
Address: 556 NW NOEGEL RD
City-St-Zip: LAKE CITY, FL 32055

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: ABBY S. HALE

TS

05/05/2004

Electronic Signature of Signing Officer or Director

Date