

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Feb 09, 2004 08:00 AM
Secretary of State

DOCUMENT # P93000076001

1. Entity Name
M & F ENTERPRISES, INC.



Principal Place of Business

4300 BAYOU BLVD
STE 12 & 13
PENSACOLA, FL 32503

Mailing Address

4300 BAYOU BLVD
STE 12 & 13
PENSACOLA, FL 32503



01052004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3208674

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MOORHEAD, STEPHEN R
4300 BAYOU BLVD
STE 13
PENSACOLA, FL 32503

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstalling)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MCDONALD, BRUCE A
2600 HEYWARD DR
PENSACOLA, FL 32503

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
FLEMING, EDWARD P
4300 BAYOU BLVD ST 13
PENSACOLA, FL 32503

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MOORHEAD, STEPHEN R
4300 BAYOU BLVD., STE 13
PENSACOLA, FL 32503

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
GREEN, WILLIAM J
1000 SORRENTO RD
PENSACOLA, FL 32507

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SMITH, JAMES D
1316 E JORDAN ST
PENSACOLA, FL 32503

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U000000043013
02/10/04-80047-022 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DIRECTOR 2/6/04 850-477-0666

Date

Daytime Phone #