2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000083879

FILED Jan 09, 2004 Secretary of State

Entity Name: A D T DOCK & FLOATATION ENTERPRISES, INC.

Current Principal Place of Business: New Principal Place of Business:

HIGHWAY 51 105 15TH ST. S.E.

STEINHATCHEE, FL 32359 US STEINHATCHEE, FL 32359 US

Current Mailing Address: New Mailing Address:

P. O. BOX 688

STEINHATCHEE, FL 32359 US

FEI Number: 59-3218255 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:

DOWERS, GREGORY R

DOWERS, GREGORY R

DOWERS, GREGORY R

688 HWY. 51 P.O. BOX 688 STEINHATCHEE, FL 32359 STEINHATCHEE, FL 32359

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: GREGORY R. DOWERS 01/09/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 REED, THOMAS
 Name:
 DOWERS, GREGORY R

 Address:
 802 EAST WILSON
 Address:
 105 15TH ST. S.E.

 City-St-Zip:
 PERRY, FL 32347
 City-St-Zip:
 STEINHATCHEE, FL 32359

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

Name: WILLIS, LEROY Name: SAVY, PATRICIA M

Address: PO BOX 258 Address: PO BOX 488

City-St-Zip: STEINHATCHEE, FL 32359 City-St-Zip: STEINHATCHEE, FL 32359

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

 Name:
 TAYLOR, MICHAEL
 Name:
 REED, THOMAS H

 Address:
 1305 RIVERSIDE DR.
 Address:
 802 E. WILSON

 City-St-Zip:
 STEINHATCHEE, FL 32359
 City-St-Zip:
 PERRY, FL 32348

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: PATRICIA M. SAVY S 01/09/2004