## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Apr 09, 2004 08:00 AM

DOCUMENT # P94000045984  1. Entity Name SHIP-N-MAIL, INC.					Secretary (	or State
Principal Place of Business Mailing Adoress 1927 S. 14TH ST 1927 S 14TH ST FERNANDINA BEACH, FL 32034 US FERNANDINA BEACH, FL 32034 US						
DO NOT WRITE IN THIS SPACE						
				01132004 No Chg-P CR2E034 (10/03)  4. FEI Number Applied For		
				59-3246304 Not Applicable		
6. Name and Address of Current Registered Agent				5. Cortificate		Required
EDWARDS, JULIE S 114 N 3RD ST FERNADINA BCH, FL 32034					NOT WRITE 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 4 applicable. (RIOTE: Registered Agent signature required when constituting)  DATE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution.			ncing _ \$5.	.00 May Be led to Fees	000000108035 04/09/04-80039-00	1 150.00
10.	OFFICERS AND DIRE	CTORS				
NAME STPEET ADDRESS CITY-SI-ZIP	EDWARDS, JULIE S 114 N 3RD STREET FERNANDINA BEACH, FL 32034					
TOLE  MAME  STREET ADDRESS  C:14-51-ZP	VD EDWARDS, CHARLES KEITH 114 N 3RD STREET FERNANDINA BEACH, FL 32034					
TITLE NAME STREET ADDRESS CITY-ST-CP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-SI-74P				IN .	THIS SPACE	
iger Name Street Address City-St-ZP				e spro	i i i i i i i i i i i i i i i i i i i	ر در
Title Name Street address City-St-Zp			<u> </u>	<u> </u>	and the second s	o an escapación de la companya de l
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this roport or supplemental report is true and accurate and that my signature shall have the same legal effect as it 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:  Y-7-04  9042775625						
SIGNATURE: 1 SIGNATURE: 1 SIGNATURE OF SIGNING OFFICER OR DIRECTOR Date OF SIGNING OFFICER OR DIRECTOR Date OF SIGNING OFFICER OR DIRECTOR						