

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000076692

FILED
Feb 02, 2004
Secretary of State

Entity Name: RS ELMORE ENTERPRISES, INC.

Current Principal Place of Business:

3177 PRIDES CROSSING
TARPON SPRINGS, FL 34688 US

New Principal Place of Business:

Current Mailing Address:

3177 PRIDES CROSSING
TARPON SPRINGS, FL 34688 US

New Mailing Address:

FEI Number: 59-3275861

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELMORE, SHIRLEY A.
3177 PRIDES CROSSING
TARPON SPRINGS, FL 34688

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: D () Delete
Name: ELMORE, ROBERT
Address: 3177 PRIDES CROSSINGS
City-St-Zip: TARPON SPGS, FL 34687

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ELMORE, ROBERT
Address: 3177 PRIDES CROSSINGS
City-St-Zip: TARPON SPGS, FL 34688

Title: D () Change (X) Addition
Name: ELMORE, SHIRLEY
Address: 3177 PRIDES CROSSING
City-St-Zip: TARPON SPRINGS, FL 34688

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: ROBERT P. ELMORE

PRES

02/02/2004

_____ Electronic Signature of Signing Officer or Director

_____ Date