

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000017614

FILED
Apr 26, 2004
Secretary of State

Entity Name: GAMING ENTERPRISES, INC.

Current Principal Place of Business:

5643 MONTE ROSSO RD
SARASOTA, FL 34243

New Principal Place of Business:

Current Mailing Address:

5643 MONTE ROSSO RD
SARASOTA, FL 34243

New Mailing Address:

FEI Number: 65-0571031

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NODHOLM, DONALD M
5643 MONTE ROSSO RD
SARASOTA, FL 34243 US

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: DS () Delete
Name: REESE, HOLLY L
Address: 1932 WOOD HOLLOW LN
City-St-Zip: SARASOTA, FL 34235

Title: DP () Delete
Name: NODHOLM, DONALD M
Address: 5643 MONTE ROSSO RD
City-St-Zip: SARASOTA, FL 34243

Title: TD () Delete
Name: TAYLOR, WAYNE
Address: 507 CO RD 41
City-St-Zip: VELARDE, NM 87582

Title: VPD () Delete
Name: HANSEN, E. PAUL
Address: 8866 ESTEPONIA CT
City-St-Zip: SARASOTA, FL 34238

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DS (X) Change () Addition
Name: DYE, HOLLY L
Address: 1932 WOOD HOLLOW LN
City-St-Zip: SARASOTA, FL 34235

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: TAYLOR, WAYNE
Address: 5318 E. DESERT VISTA RD.
City-St-Zip: PARADISE VALLEY, AZ 85253

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: DONALD M NODHOLM

PD

04/26/2004

Electronic Signature of Signing Officer or Director

_____ Date