

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P95000055919

Entity Name: SJM ENTERPRISES, INC.

FILED
Apr 30, 2003
Secretary of State

Current Principal Place of Business:

5145 HONEYNUT LANE
WINTER MERE, FL 34786 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 663
WINTER MERE, FL 347860663 US

New Mailing Address:

FEI Number: 59-3328788 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTOCCI, SUSAN J
5145 HONEYNUT LANE
WINTER MERE, FL 34786 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: DP () Delete
Name: MARTOCCI, SUSAN J
Address: 5145 HONEYNUT LANE
City-St-Zip: WINTER MERE, FL 34786

Title: DVTS () Delete
Name: BOUDREAUX, JACQUELYN F
Address: 5145 HONEYNUT LANE
City-St-Zip: WINTER MERE, FL 34786

Title: VD (X) Delete
Name: ROLLEN, PATRICIA S
Address: 2853 TANGELO TREE DR.
City-St-Zip: ORLANDO, FL 32811

Title: VD () Delete
Name: BOUDREAUX, GERALD D
Address: 5145 HONEYNUT LANE
City-St-Zip: WINTER MERE, FL 34786

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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 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: JACQUELYN F. BOUDREAUX

VP

04/30/2003

Electronic Signature of Signing Officer or Director

Date