


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2004 08:00 AM
Secretary of State

DOCUMENT # P95000089383	
1. Entity Name ALBERT CUMMINGS ENTERPRISES, INC.	

Principal Place of Business 1607- 16TH AVE E PALMETTO, FL 34221	Mailing Address 810- 11 ST. E. BRADENTON, FL 34208
---	--

DO NOT WRITE IN THIS SPACE



01062004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0626731	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent CUMMINGS, ALBERT JR 810- 11 ST E. BRADENTON, FL 34208
--

**DO NOT WRITE
IN 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CUMMINGS, JESSIE 810- 11 ST E BRADENTON, FL 34208
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD CUMMINGS, DWAYNE 1607 16TH AVENUE EAST PALMETTO, FL 34221
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CUMMINGS, ALBERT JR. 1607 16TH AVENUE EAST PALMETTO, FL 34221
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CUMMINGS, ALBERT SR. 1607 16TH AVENUE EAST PALMETTO, FL 34221
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000008080
01/20/04-80050-013 158.75

**DO NOT WRITE
IN THIS SPACE**

12. 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jessie B. Cummings, Pres 1/6/2004 941-748-3407
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #