## ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # P96000045585**

Entity Name
 YERKES ENTERPRISES, INC.



FILED Jan 07, 2005 08:00 AM Secretary of State

Principal Place of Business 19830 LITTLE LN

ALVA, FL 33920

Mailing Address

19830 LITTLE LANE

ALVA, FL 33920



01042005

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-0672402

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

YERKES, CLYDE A 19830 LITTLE LANE ALVA, FL 33920

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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 little if applicable. (NOTE: Registered Agent algorithm registered when reinstaling)  OATE				
FILE NOW!!! FEE IS \$150.00  After May 1, 2005 Fee will be \$550.00  9. Election Campaign Fin Trust Fund Contribution				
10,	OFFICERS AND DIREC	TORS		
NAME STREFT ADDRESS CITY-ST-ZIP	PSTD YERKES, CLYDE A 19830 LITTLE LANE ALVA, FL 33920			U00000173108
TITLE NAME STREET ADDRESS CITY-ST-ZIP				01/07/05-80005-019 150.00
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12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f), 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 eath, 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:

SHORLE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIR

1/4/05

239 - 728 - 2782

Daytime Phone if