2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000021316

2120 NW 16 CT

CRYSTAL RIVER, FL 34428 US

Address:

City-St-Zip:

Entity Name: CHARLES A. WENTZELL ENTERPRISES, INC

FILED Jan 07, 2005 Secretary of State

•			,			
Current P	rincipal Place	of Business:	New Prince	New Principal Place of Business:		
2120 NW 1 CRYSTAL	6 CT. RIVER, FL 344	128 US				
Current M	ailing Address	5:	New Maili	New Mailing Address:		
2120 NW 1 CRYSTAL	6 CT. RIVER, FL 344	128 US	PO BOX 30 CRYSTAL	68 RIVER, FL 34423	US	
FEI Number:	65-0734498	FEI Number Applied For ()	FEI Number Not App	icable () Cer	tificate of Status Desired (X)	
Name and	Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
2120 NW 1	L, CHARLES A 6 CT. RIVER, FL 344					
The above in the State		ubmits this statement for the p	ourpose of changing i	ts registered office	or registered agent, or both,	
SIGNATUR	RE:					
	Electroni	c Signature of Registered Age	ent		Date	
Election Can	npaign Financing	Trust Fund Contribution ().				
OFFICERS	S AND DIRECT	ORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	DP () WENTZELL, CH 2120 NW 16 CT CRYSTAL RIVER		Title: Name: Address: City-St-Zip:	DPVT (X) Cha WENTZELL, CHARL 2120 NW 16 CT. CRYSTAL RIVER, FI		
Title: Name: Address: City-St-Zip:	V (X) WENTZELL, AL/ 2120 NW 16 CT CRYSTAL RIVER		Title: Name: Address: City-St-Zip:	()Chai	nge () Addition	
Title: Name: Address: City-St-Zip:	S () WENTZELL, MA 2120 NW 16 CT CRYSTAL RIVER		Title: Name: Address: City-St-Zip:	()Chai	nge () Addition	
Title: Name:	T (X) ENGLUND, DUA	Delete NE A	Title: Name:	() Chai	nge () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: CHARLES A. WENTZELL DPVT 01/07/2005