

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000080790

FILED  
Jan 06, 2004  
Secretary of State

Entity Name: NORCROSS ENTERPRISES, INC.

## Current Principal Place of Business:

901 B NW SUNSET DR  
STUART, FL 34994

## New Principal Place of Business:

2920 W AIRPORT BLVD  
SANFORD, FL 32771

## Current Mailing Address:

901 B NW SUNSET DR  
STUART, FL 34994

## New Mailing Address:

2920 W AIRPORT BLVD  
C/O JEAN RIESE  
SANFORD, FL 32771

FEI Number: 65-0785644

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NORCROSS, NED C  
901B NW SUNSET DR  
STUART, FL 34994 US

## Name and Address of New Registered Agent:

NORCROSS, NED C  
2920 W AIRPORT BLVD  
C/O JEAN RIESE  
SANFORD, FL 32771 US

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:

01/06/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: NORCROSS, NED C  
Address: 901 B NW SUNSET DR  
City-St-Zip: STUART, FL 34995

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change ( ) Addition  
Name: NORCROSS, NED C  
Address: 800 NW FORK RD UNIT 6-1  
City-St-Zip: STUART, FL 34995

Title: SEC ( ) Change (X) Addition  
Name: RIESE, JEAN  
Address: 2920 W AIRPORT BLVD  
City-St-Zip: SANFORD, FL 32771

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: NED C NORCROSS

P/D

01/06/2004

Electronic Signature of Signing Officer or Director

Date