

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000037778

FILED
Apr 18, 2004
Secretary of State

Entity Name: EASTERDAY ENTERPRISES INCORPORATED

Current Principal Place of Business:

10200 HIGHWAY 92, EAST
TAMPA, FL 33610 US

New Principal Place of Business:

3107 ELDERWOOD PLACE
SEFFNER, FL 33584 US

Current Mailing Address:

P.O. BOX 266
SEFFNER, FL 33584266 US

New Mailing Address:

FEI Number: 59-3506523 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

EASTERDAY, SHERRY D
3107 ELDERWOOD PL
SEFFNER, FL 33584

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: PCEO () Delete
Name: EASTERDAY, ROBERT D
Address: 3107 ELDERWOOD PL
City-St-Zip: SEFFNER, FL 33584

Title: VSTC () Delete
Name: EASTERDAY, SHERRY D
Address: 3107 ELDERWOOD PL
City-St-Zip: SEFFNER, FL 33584

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: SHERRY EASTERDAY

VP

04/18/2004

Electronic Signature of Signing Officer or Director

_____ Date