2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2004
Secretary of State

DOCUMENT# P98000053589

Entity Name: DORTON INDUSTRIES CORP.

Current Principal Place of Business:

1478 SUNSHADOW DR.
104
CASSELBERRY, FL 32707

New Principal Place of Business:

210 PINE WINDS DR.
SANFORD, FL 32773

Current Mailing Address:

POST OFFICE BOX 181492
CASSELBERRY, FL 32718

New Mailing Address:

210 PINE WINDS DR.
SANFORD, FL 32773

FEI Number: 65-0843352 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

MILTON, SANTIAGO
210 PINE WINDS DR.
SANFORD, FL 32773

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: MILTON SANTIAGO 03/10/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete
Name: SANTIAGO, MILTON
Address: 210 PINE WINDS DR.
City-St-Zip: SANFORD, FL 32773

Title: D (X) Delete
Name: SANTIAGO, DAVID
Address: 186 RUGAR STREET #19
City-St-Zip: PLATTSBURG, NY 12901

Title: SD (X) Delete
Name: SANTIAGO, DAVID
Address: 186 RUGAR STREET #19
City-St-Zip: PLATTSBURGH, NY 12901

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD (X) Change ( ) Addition
Name: SANTIAGO, MILTON
Address: 210 PINE WINDS DR.
City-St-Zip: SANFORD, FL 32773

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: MILTON SANTIAGO PTSD 03/10/2004
Electronic Signature of Signing Officer or Director Date