

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000054124

Entity Name: 3E TREE FARMS, INC.

FILED  
Apr 30, 2004  
Secretary of State

## Current Principal Place of Business:

P.O. BOX 476  
LOXAHATCHEE, FL 33470

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 476  
LOXAHATCHEE, FL 33470

## New Mailing Address:

FEI Number: 65-0852588

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LESHER, GERALD  
1555 PALM BEACH LAKES BLVD, STE 1510  
WEST PALM BEACH, FL 33401 US

## 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: VP ( ) Delete  
Name: BLESS, CHRISTOPHER  
Address: P.O. BOX 476  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: VP (X) Delete  
Name: KEEGAN, TIMOTHY R  
Address: P.O. BOX 476  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: P ( ) Delete  
Name: GOLTZENE, IRENE  
Address: PO BOX 476  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: VP ( ) Delete  
Name: GOLTZENE, JR., THOMAS R  
Address: PO BOX 476  
City-St-Zip: LOXAHATCHEE, FL 33470

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP S (X) Change ( ) Addition  
Name: BLESS, CHRISTOPHER  
Address: P.O. BOX 476  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P (X) Change ( ) Addition  
Name: GOLTZENE, THOMAS R  
Address: PO BOX 476  
City-St-Zip: LOXAHATCHEE, FL 33470

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: CHRISTOPHER BLESS

VP

04/30/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date