

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000084765

Entity Name: NORRIS FLORIDA INC.

FILED
Mar 25, 2004
Secretary of State

Current Principal Place of Business:

5949 HIGHWAY A1A
%NORRISS CRAZYCRAB RESTAURANT
PALM COAST, FL 32137

New Principal Place of Business:

Current Mailing Address:

5949 HIGHWAY A1A
%NORRISS CRAZYCRAB RESTAURANT
PALM COAST, FL 32137

New Mailing Address:

FEI Number: 59-3538276 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUNCAN, DONALD W PA
21 OLD KINGS RD. N. B 110
PALM COAST, FL 32137

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: P () Delete
Name: NORRIS, JAMES
Address: 179 LONDON DRIVE
City-St-Zip: PALM COAST, FL 32137

Title: P () Delete
Name: NORRIS, VICKY
Address: 179 LONDON DRIVE
City-St-Zip: PALM COAST, FL 32137

Title: ST () Delete
Name: RICKENBACK, KATHLEEN
Address: 58 BRISTOL LANE
City-St-Zip: PALM COAST, FL 32137

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NORRIS, JAMES
Address: 2 COTTON COURT
City-St-Zip: PALM COAST, FL 32137

Title: VP (X) Change () Addition
Name: RICKENBACK, KATHLEEN
Address: 58 BRISTOL LANE
City-St-Zip: PALM COAST, FL 32137

Title: ST (X) Change () Addition
Name: NORRIS, VICKY
Address: 2 COTTON COURT
City-St-Zip: PALM COAST, FL 32137

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: VICKY NORRIS

ST

03/25/2004

Electronic Signature of Signing Officer or Director

Date