

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000098264

Entity Name: ELJ, INC.

FILED  
Apr 30, 2004  
Secretary of State

## Current Principal Place of Business:

40001 EMERALD COAST PARKWAY  
DESTIN, FL 32541

## New Principal Place of Business:

## Current Mailing Address:

40001 EMERALD COAST PARKWAY  
DESTIN, FL 32541

## New Mailing Address:

FEI Number: 59-3562826

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MATTHEWS, DANA C  
607 HIGHWAY 98 EAST  
DESTIN, FL 32541 US

## Name and Address of New Registered Agent:

MATTHEWS, DANA C  
4475 LEGENDARY DR.  
BOX 40  
DESTIN, FL 32541 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:

04/30/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: ADKINSON, MIKE  
Address: 502 GREENWAY COVE  
City-St-Zip: NICEVILLE, FL 32578

Title: VPS ( ) Delete  
Name: ADKINSON, CHAD  
Address: 814 SITE C-6  
City-St-Zip: FREEPORT, FL 32439

Title: VPT ( ) Delete  
Name: ADKINSON, WAYNE  
Address: 29874 US HWY 331 S  
City-St-Zip: FREEPORT, FL 32439

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPS (X) Change ( ) Addition  
Name: ADKINSON, CHAD  
Address: 90 SPIRES LANE UNIT 11B  
City-St-Zip: SANTA ROSA BEACH, FL 32459

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: MIKE ADKINSON

P

04/30/2004

Electronic Signature of Signing Officer or Director

Date