2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2004 08:00 AM
Secretary of State

DOCUMENT # P99000038628

1. Entity Name
ENCON INTERNATIONAL, INC.

Principal Place of Business	Mailing Address
151 VILLA DI ESTE TERR #113 LAKE MARY, FL 32746	151 VILLA DI ESTE TERR #113 LAKE MARY, FL 32746

DO NOT WRITE IN THIS SPACE

02072004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-3571911

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

WILLITS, CHARLES W
1407 EAST ROBINSON STREET
ORLANDO, FL 32801-2118

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000050649
02/16/04-80015-012 150.00

10. OFFICERS AND DIRECTORS

TITLE	CCEO
NAME	PRIEST, JOHN W
STREET ADDRESS	151 VILLA DI ESTE TERR #113
CITY-ST-ZIP	LAKE MARY, FL 32746
TITLE	D
NAME	WILLITS, CHARLES W
STREET ADDRESS	1407 EAST ROBINSON STREET
CITY-ST-ZIP	ORLANDO, FL 32801
TITLE	D
NAME	CHALKIND, LEONARD S
STREET ADDRESS	2600 SOUTH GESSNER STE 506
CITY-ST-ZIP	HOUSTON, TX 77063
TITLE	D
NAME	COPLEAND, JAMES H III
STREET ADDRESS	4212 GRANT BLVD
CITY-ST-ZIP	ORLANDO, FL 32804
TITLE	D
NAME	PALMER, MARK R
STREET ADDRESS	2 SOUTH BRIAR HOLLOW LN #6
CITY-ST-ZIP	HOUSTON, TX 77027
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ JOHN W. PRIEST 2/6/04 407-833-9970
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #