

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000052997

FILED
May 03, 2004
Secretary of State

Entity Name: JOHNS RIVER PROPERTIES, INC.

Current Principal Place of Business:

4229 WICKS BRANCH RD
ST. AUGUSTINE, FL 32086

New Principal Place of Business:

Current Mailing Address:

4229 WICKS BRANCH RD
ST. AUGUSTINE, FL 32086

New Mailing Address:

FEI Number: 59-3586749

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CREAMER, JAMES E JR.
602 BAYWOOD TRAIL
ST. AUGUSTINE, FL 32086

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: CREAMER JR, JAMES E
Address: 4229 WICKS BRANCH RD
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: ST () Delete
Name: CREAMER, JULIE Z
Address: 4229 WICKS BRANCH RD
City-St-Zip: SAINT AUGUSTINE, FL 32086

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JAMES E. CREAMER JR.

PRES

05/03/2004

Electronic Signature of Signing Officer or Director

Date