## 2004 FOR PROFIT CORPORATION ANNUAL REPORT **FILED** Apr 12, 2004 08:00 AM **DOCUMENT # P99000082858 Secretary of State** GJP ENTERPRISES, INC. Principal Place of Business Mailing Address PMB 289 PMB 289 3020-1 PROSPERITY CHURCH ROAD 3020-1 PROSPERITY CHURCH ROAD CHARLOTTE, NC 28269 CHARLOTTE, NC 28269 No Chg-P CR2E034 (10/03) 03162004 DO NOT WRITE IN THIS SPACE 4. FEI Number 58-2498898 \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent DO NOT WRITE ANDREWS, JANA 2807 W. BUSCH BLVD., SUITE 202 TAMPA, FL 33618 IN THIS SPACE 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. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOWIII FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees

U00000109838 04/12/04-80059-018 150.00

Applied For

Not Applicable

DO NOT WRITE IN THIS SPACE

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 attachapter with an address. With all other like empowered. changed, or on an attachme

SIGNATURE: PM

10. TITLE

NAME

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MARKE STREET ADDRESS

STREET ADDRESS

CITY - ST-7IP

CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TILE MARKE STREET ADDRESS CRY-ST-ZIP

OFFICERS AND DIRECTORS

GREESON, JOHN F

TAMPA, FL 33647

17908 ARBOR GREENE DRIVE