2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000106368

Entity Name: TFP AIR, INC.

FILED Mar 31, 2004 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1536 KINGSLEY AVENUE					
STE 124 ORANGE PARK, FL 32073					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
1536 KINGSLEY AVENUE					
STE 124 ORANGE PARK, FL 32073					
FEI Number: 5	59-3612311	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
CRIBB, JAMES C 2788 PACES FERRY ROAD S. ORANGE PARK, FL 32073					
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:					
	Electror	nic Signature of Registered Agent		Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS					
Title:) Delete	Title:	() Change () Addition	
Name: Address:	HOLLANDER, F 7894 BISSHOP	P LAKE ROAD N.	Name: Address:		
City-St-Zip:	JACKSONVILLI	E, FL 32256	City-St-Zip:		
Title:	. ,) Delete	Title:	() Change () Addition	
Name: Address:	DAVIS, JAMES 137 ABACO WA		Name: Address:		
City-St-Zip:		BEACH, FL 32082	City-St-Zip:		
Title:	S ()) Delete	Title:	() Change () Addition	
Name:	CRIBB, JAMES		Name:		
Address: City-St-Zip:	ORANGE PARK	ERRY ROAD S. K, FL 32073	Address: City-St-Zip:		
Title:	T ()) Delete	Title:	() Change () Addition	
Name:	O'KEEFE, TIM		Name:		
Address:	3520 BARQUEI		Address:		
City-St-Zip:	JACKSONVILLI	E, FL 32216	City-St-Zip:		
Title:	` ') Delete	Title:	() Change () Addition	
Name: Address:	GALLAGHER, E 13485 PRINCE		Name: Address:		
City-St-Zip:	JACKSONVILLI		City-St-Zip:		
Title:	D ()) Delete	Title:	() Change () Addition	
Name:	HUEHN, KEL	DANIDE DD	Name:		
Address: City-St-Zip:	1840 SELVA G ATLANTIC BEA		Address: City-St-Zip:		
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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: TIMOTHY M O'KEEFE T 03/31/2004