## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OF

## FILED Apr 29, 2005 08:00 AM Secretary of State

Daytime Phone ≠

DOCUMENT # V37099  1. Entity Name MCDUFFIE ENTERPRISES, INC.			Secretary of State
Principal Place of Business  523 E. MARTIN LUTHER KING BLVD.  STARKE, FL 32091  Mailing Address  523 E. MARTIN LUTHER KING BLVD.  STARKE, FL 32091  STARKE, FL 32091		E CREST MITMEN IIII (MANI MENIN INTER INI MENIN	
DO NOT WRITE IN THIS SPACE			04282005 No Chg-P CR2E034 (10/03)  4. FEI Number
6. Name and Address of Current Registered Agent MITCHELL, MAMIE L. 998 LAMAR ST STARKE, FL 32091			DO NOT WRITE 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.  SIGNATURE  Signature, typed or printed name of registered agent and tiple if applicable.  (NOTE Registered Agent signature required when renstating)  DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.  Added to Fees  10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OP MITCHELL, MAMIE L 998 LEMAR ST. STARKE, FL 32091		Managaran
TITLE NAME STREET ADDRESS CITY-ST-ZIP	GMD MITCHELL, ŠIMON 998 LAMAR ST. STARKE, FL 32091		U00000342916 04/23/05-80075-004 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MCDUFFIE, MICHAEL 523 E. BROWN LEE ST. STARKE, FL 32091	ti quitti v	DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JUDGE, SADIE L 5614 12TH AVE S. TAMPA, FL 33619		IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	C JUDGE, ALLEN 5614 12TH AVE. S. TAMPA, FL 33619	·	
NAME STREET ADDRESS CITY-ST-ZIP	sertify that the information symplicid with this tiling does not qualify for the over	mation execut in Sec	ction 119 (773V) Florida Statutos Lister costs that the inter-
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.			