


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 15, 2004 08:00 AM
Secretary of State

DOCUMENT # V50174 1. Entity Name MORGAN ENTERPRISES, INC.	
---	---

Principal Place of Business 808 8TH AVE. DR. WEST BRADENTON, FL 34205	Mailing Address 808 8TH AVE. DR. WEST BRADENTON, FL 34205
---	---

DO NOT WRITE IN THIS SPACE



04072004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0346491	Applied For <input type="checkbox"/> Not Applicable
------------------------------------	--

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

6. Name and Address of Current Registered Agent MORGAN, WAYNE 808 8TH AVE. DR. WEST BRADENTON, FL 34205	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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000113354 04/15/04-80006-005 150.00
---	---	--

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD MORGAN, WAYNE 914 TROPICAL CT. BRADENTON, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD MORGAN, PRESTON R. 914 TROPICAL CT. BRADENTON, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD MORGAN, KEVIN D 914 TROPICAL COURT BRADENTON, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD MORGAN, JOYCE 914 TROPICAL CT BRADENTON, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**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 807, 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: Joyce Morgan **JOYCE MORGAN** 4/7/04 741-718-6018
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #