

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V51274

FILED  
Apr 21, 2005  
Secretary of State

Entity Name: TRY ENTERPRISES, INC.

## Current Principal Place of Business:

9755 ALVIN ROAD SOUTH  
JACKSONVILLE, FL 32222

## New Principal Place of Business:

## Current Mailing Address:

9755 ALVIN ROAD SOUTH  
JACKSONVILLE, FL 32222

## New Mailing Address:

FEI Number: 59-3179925

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GAMMILL, SHELLIE E  
9755 ALVIN ROAD SOUTH  
JACKSONVILLE, FL 32225 US

## 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: STD ( ) Delete  
Name: GAMMILL, SHELLIE EUG, ENIA  
Address: 9755 ALVIN ROAD SOUTH  
City-St-Zip: JACKSONVILLE, FL

Title: PVD ( ) Delete  
Name: GAMMILL, SHELLIE E  
Address: 9755 ALVIN ROAD SOUTH  
City-St-Zip: JACKSONVILLE, FL 32222

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD (X) Change ( ) Addition  
Name: TRY ENTERPRISES, INC., .  
Address: 9755 ALVIN ROAD SOUTH  
City-St-Zip: JACKSONVILLE, FL 32222 US

Title: PVD (X) Change ( ) Addition  
Name: GAMMILL, SHELLIE E  
Address: 9755 ALVIN ROAD SOUTH  
City-St-Zip: JACKSONVILLE, FL 32222 US

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: GAMMILL, SHELLIE EUGENIA

PVD

04/21/2005

Electronic Signature of Signing Officer or Director

Date