2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 02, 2005
Secretary of State

DOCUMENT# J30174

Entity Name: R. J. DEFILIPPO, INC.

Current Principal Place of Business:

% ROBERT DEFILIPPO
115 TRAILS END DR
PORT ORANGE, FL 321194131

New Principal Place of Business:

% ROBERT DEFILIPPO
115 TRAILS END DR
PORT ORANGE, FL 321294131

Current Mailing Address:

% ROBERT DEFILIPPO
115 TRAILS END DR
PORT ORANGE, FL 321194131

New Mailing Address:

% ROBERT DEFILIPPO
115 TRAILS END DR
PORT ORANGE, FL 321294131

FEI Number: 59-2731906 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DEFILIPPO, ROBERT
115 TRAILS END DR
PORT ORANGE, FL 32119 US

Name and Address of New Registered Agent:

DEFILIPPO, ROBERT
115 TRAILS END DR
PORT ORANGE, FL 32129 US

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: 03/02/2005
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: DEFILIPPO, ROBERT,
Address: 115 TRAILS END DR.
City-St-Zip: PT. ORANGE, FL

Title: ST ( ) Delete
Name: DEFILIPPO, RACHEL
Address: 115 TRAILS END DR.
City-St-Zip: PORT ORANGE, FL 32119

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: DEFILIPPO, ROBERT,
Address: 115 TRAILS END DR.
City-St-Zip: PT. ORANGE, FL 32129

Title: ST (X) Change ( ) Addition
Name: DEFILIPPO, RACHEL
Address: 115 TRAILS END DR.
City-St-Zip: PORT ORANGE, FL 32129

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: ROBERT DEFILIPPO P 03/02/2005
Electronic Signature of Signing Officer or Director — Date