

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000010116

FILED
Apr 29, 2005
Secretary of State

Entity Name: REO-JR. ENTERPRISES, INC.

Current Principal Place of Business:

2193 WEST KING STREET
SUITE C
COCOA, FL 32926

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 560458
ROCKLEDGE, FL 329560458

New Mailing Address:

FEI Number: 59-3630700

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OWENS, RAYMOND E
2193 WEST KING STREET
SUITE C
COCOA, FL 32926 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: D () Delete
Name: OWENS, TRACY BETH
Address: 3810 STONEMONT DR.
City-St-Zip: COCOA, FL 32926

Title: D () Delete
Name: OWENS, RAYMOND EDWARD
Address: 2193 WEST KING STREET
City-St-Zip: COCOA, FL 32926

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: TRACY OWENS

D

04/29/2005

Electronic Signature of Signing Officer or Director

Date