

**2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Jul 26, 2005  
Secretary of State**

DOCUMENT# P03000142209

Entity Name: RISING SUN RENOVATIONS & INVESTMENTS, INC.

**Current Principal Place of Business:**

505 N. WASHINGTON STREET  
JACKSONVILLE, FL 32202 US

**New Principal Place of Business:**

**Current Mailing Address:**

505 N. WASHINGTON STREET  
JACKSONVILLE, FL 32202 US

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MCSTINE, CHARLENE M  
14047 DUVAL ROAD  
JACKSONVILLE, FL 32218 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

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MCSTINE, LEO R  
Address: 505 N. WASHINGTON STREET  
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: T ( ) Delete  
Name: MCSTINE, CHARLENE M  
Address: 505 N. WASHINGTON STREET  
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: T (X) Change ( ) Addition  
Name: MCSTINE, EDWARD R  
Address: 505 N. WASHINGTON STREET  
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: S ( ) Change (X) Addition  
Name: DAVIS, FRANK A  
Address: 505 N. WASHINGTON STREET  
City-St-Zip: JACKSONVILLE, FL 32202 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: LEO R MCSTINE

P

07/26/2005

Electronic Signature of Signing Officer or Director

Date