


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2007 8:00 am
Secretary of State

01-25-2007 90038 034 ***150.00

DOCUMENT # 482651 1. Entity Name R & R BUILDERS, INC.	
--	---

Principal Place of Business P.O. BOX 8664 DEERFIELD BEACH, FL 33443-0627	Mailing Address P.O. BOX 8664 DEERFIELD BEACH, FL 33443-0627
--	--

2. Principal Place of Business - No P.O. Box # 4287 S.W. High Meadows Avenue Suite, Apt. #, etc.	3. Mailing Address (Same) Suite, Apt. #, etc.
City & State Palm City, FL	City & State (Same)
Zip 34990	Country Martin

00000001



01222007 Chg-P CR2E034 (12/06)

4. FEI Number 59-1581610	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent ROGERS, GREGORY A 663 SW KEATS AVE DEERFIELD, FL 34990	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 4287 SW High Meadows Avenue City Palm City FL Zip Code 34990
---	--

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Gregory A Rogers DATE 1/22/07

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	---

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROGERS, GREGORY A. 663 SW KEATS AVE PALM CITY, FL 34990 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4287 S.W. High Meadows Avenue Palm City, FL 34990
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ROGERS, JOHN P 1123 SW KEATS AVE PALM CITY, FL 34990 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4287 S.W. High Meadows Avenue Palm City, FL 34990
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD ROGERS, JOHN P 1123 SW KEATS AVE PALM CITY, FL 34990 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4287 S.W. High Meadows Avenue Palm City, FL 34990
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 607, 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: Gregory A Rogers DATE 1/22/07 DAYTIME PHONE # 772-463-7728

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR