2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 19, 2005
Secretary of State

DOCUMENT# 555565

Entity Name: D & R ASSOCIATES, INC.

Current Principal Place of Business:

483 NW 68TH AVE
OCALA, FL 34482 US

New Principal Place of Business:

Current Mailing Address:

483 NE 68TH AVE
OCALA, FL 34482 US

New Mailing Address:

FEI Number: 59-1844767 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HENRY, DICK R PRESIDE
3 WAGON WHEEL WAY
OCALA, FL 34482 US

Name and Address of New Registered Agent:

HENRY, SCOTT R PRESIDE
3 WAGON WHEEL WAY
OCALA, FL 34482 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: SCOTT R HENRY 08/19/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: VTS ( ) Delete
Name: HENRY, SCOTT R VTS
Address: 3 WAGON WHEEL WAY
City-St-Zip: OCALA, FL 34482 US

Title: D ( ) Delete
Name: HENRY, SCOTT R VTS
Address: 3 WAGON WHEEL WAY
City-St-Zip: OCALA, FL 34482 US

Title: PD (X) Delete
Name: HENRY, DICK R PD
Address: 3 WAGON WHEEL WAY
City-St-Zip: OCALA, FL 34482 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: HENRY, SCOTT R PD
Address: 3 WAGON WHEEL WAY
City-St-Zip: OCALA, FL 34482 US

Title: V (X) Change ( ) Addition
Name: HENRY, MOLLIE F VTSD
Address: 3 WAGON WHEEL WAY
City-St-Zip: OCALA, FL 34482 US

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: SCOTT R HENRY P 08/19/2005
Electronic Signature of Signing Officer or Director Date