

2005 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # H21998

1. Entity Name
PANHANDLE AUCTIONS INCORPORATED



Principal Place of Business
% RONALD DAVIS
3453 WOODREST RD.
COTTONDALE, FL 32431

Mailing Address
% RONALD DAVIS
3453 WOODREST RD.
COTTONDALE, FL 32431

FILED
Mar 09, 2005 08:00 AM
Secretary of State



DO NOT WRITE IN THIS SPACE

03012005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2459652

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DAVIS, RONALD
3453 WOODREST RD
COTTONDALE, FL 32431

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
DAVIS, RONALD
3453 WOODREST ROAD
COTTONDALE, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
DAVIS, SHIRLEY
3453 WOODREST RD.
COTTONDALE, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
WILSON, KIM
3453 WOODREST RD.
COTTONDALE, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U000000256431

03/09/05-80015-012 158.75

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

Ronald Davis
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/1/05

Date

850-573-1056
Daytime Phone #