

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H82709

Entity Name: R. G. REYNOLDS, INC.

FILED
Apr 28, 2005
Secretary of State

Current Principal Place of Business:

11000 - 37 METRO PARKWAY
P.O.BOX 60824
FT MYERS, FL 33906

New Principal Place of Business:

Current Mailing Address:

11000 - 37 METRO PARKWAY
P.O.BOX 60824
FT MYERS, FL 33906

New Mailing Address:

FEI Number: 59-2591220

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUNSUCKER, JEFFREY
1682 N. HERMITAGE RD.
FT MYERS, FL 33919 US

Name and Address of New Registered Agent:

HUNSUCKER, JEFFERY L
1682 N. HERMITAGE RD.
FT MYERS, FL 33919 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: JEFFERY L HUNSUCKER

04/28/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: REYNOLDS, RICHARD,
Address: 659 RIVERSIDE TRACE CT
City-St-Zip: FT MYERS, FL 33916

Title: VST () Delete
Name: HUNSUCKER, JEFFERY,
Address: 1682 N HERITAGE RD
City-St-Zip: FT MYERS, FL 33919

Title: D () Delete
Name: STANRIDGE, DANA
Address: 1996 ROCKDALE CIR
City-St-Zip: SNELLVILLE, GA 30078

Title: D () Delete
Name: HUNSUCKER, PATRICIA,
Address: 1682 N.HERMITAGE RD.
City-St-Zip: FT.MYERS, FL 33919

Title: D () Delete
Name: STANDRIDGE, MICHAEL
Address: 1996 ROCKDALE CIRCLE
City-St-Zip: SNELLVILLE, GA 30078

Title: D () Delete
Name: EVANS, BRIAN
Address: 2118 NW 5TH PL
City-St-Zip: CAPE CORAL, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: REYNOLDS, RICHARD,
Address: 659 RIVERSIDE TRACE CT
City-St-Zip: FT MYERS, FL 33916

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

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

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

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: JEFFERY L HUNSUCKER

ST

04/28/2005

Electronic Signature of Signing Officer or Director

Date