2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J63210

ELLIS, RONALD J

519 OAKWOOD CT.

ALTAMONTE SPRINGS, FL 32714

Name:

Address:

City-St-Zip:

Entity Name: J. K. 2 HOLMES CONSTRUCTORS, INC.

FILED Jun 29, 2005 Secretary of State

,		,,,,,,,				
Current P	rincipal Place	of Business:	New Princ	New Principal Place of Business:		
STE 101	S LAKE COUR	Т				
APOPKA,	FL 32703 L	S				
Current M	lailing Addres	s:	New Maili	New Mailing Address:		
P OB OX	1270 DD, FL 32798	US				
FEI Number	: 59-2785005	FEI Number Applied For()	FEI Number Not Appl	cable ()	Certificate of Status Desired ()	
Name and	d Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
	IND LAKE RD	S				
	e named entity s e of Florida.	submits this statement for the p	urpose of changing it	s registered	office or registered agent, or both,	
SIGNATU	RE:					
	Electron	ic Signature of Registered Age	nt	Date		
		8(2)(b), F.S., the corporation did not Trust Fund Contribution ().	t receive the prior notic	э.		
OFFICER	S AND DIREC	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () HOLMES, PAUL 5807 ROUND L APOPKA, FL		Title: Name: Address: City-St-Zip:	(() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () AMUNDSON, RI 1742 MAPLE LE WINDERMERE,	EAF DR.	Title: Name: Address: City-St-Zip:	(() Change () Addition	
Title: Name: Address: City-St-Zip:	S () HOLMES, MICH 468 LANARKSH APOPKA, FL 32	IRE PL.	Title: Name: Address: City-St-Zip:	HOLMES, MI	WILDE STREET	
Title:	T ()	Delete	Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: PAUL R. HOLMES PRES 06/29/2005