


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**


**FILED**  
**Apr 30, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # L98393**  
 1. Entity Name  
**R & R PURCHASING, INC.**



Principal Place of Business      Mailing Address  
**1500 EAST CROOKED LAKE DRIVE**      **1500 EAST CROOKED LAKE DRIVE**  
**EUSTIS, FL 32726**      **EUSTIS, FL 32726**

**DO NOT WRITE IN THIS SPACE**



04272004    No Chg-P    CR2E034 (10/03)

4. FEI Number <b>59-3029177</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

**REASTER, JAY**  
**1500 EAST CROOKED LAKE DRIVE**  
**EUSTIS, FL 32726**

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**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 \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

**9.** Election Campaign Financing Trust Fund Contribution  **\$5.00** May Be Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE D	NAME REASTER, JAY
STREET ADDRESS 1500 E. CROOKED LAKE DR.	CITY ST ZIP EUSTIS, FL
TITLE D	NAME REASTER, MARCIA
STREET ADDRESS 1500 E. CROOKED LAKE DR.	CITY ST ZIP EUSTIS, FL
TITLE	NAME
STREET ADDRESS	CITY ST ZIP
TITLE	NAME
STREET ADDRESS	CITY ST ZIP
TITLE	NAME
STREET ADDRESS	CITY ST ZIP

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 04/30/04-30133-006 150.00

**DO NOT WRITE 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)(c), Florida Statutes. I further certify that the information indicated on this report or subsequent report is true and accurate and that my signature shall have the same legal effect as I 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 a title, like empowered.

**SIGNATURE:** Marcia Reaster    Marcia Reaster    4/27/04    352-483-2226

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR