

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008667

FILED
Feb 28, 2005
Secretary of State

Entity Name: REEFS, INC.

Current Principal Place of Business:

1704 CHERRY STREET
PANAMA CITY, FL 32401

New Principal Place of Business:

Current Mailing Address:

1704 CHERRY STREET
PANAMA CITY, FL 32401

New Mailing Address:

FEI Number: 59-3761134

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRIZZARD, DANNY
1704 CHERRY STREET
PANAMA CITY, FL 32401 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GRIZZARD, LINDA
Address: 1704 CHERRY STREET
City-St-Zip: PANAMA CITY, FL 32401

Title: VD () Delete
Name: GRIZZARD, DANNY
Address: PO BOX 2116
City-St-Zip: PANAMA CITY, FL 32401

Title: SD () Delete
Name: FARRILL, LISA
Address: 2129 FOX RUN
City-St-Zip: LYNN HAVEN, FL 32444

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DANNY GRIZZARD

VD

02/28/2005

Electronic Signature of Signing Officer or Director

Date