2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005
Secretary of State

DOCUMENT# P00000057302

Entity Name: C& R OF PALM BEACH, INC.

Current Principal Place of Business:

14232 86TH ROAD NORTH
LOXAHATCHEE, FL 33470

New Principal Place of Business:

Current Mailing Address:

14232 86TH ROAD NORTH
LOXAHATCHEE, FL 33470

New Mailing Address:

FEI Number: 65-1044782 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

JACOBS, RONALD
14232 86 NORTH
LOXAHATCHEE, FL 33470 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: JACOBS, RONALD
Address: 14232 86 NORTH
City-St-Zip: LOXAHATCHEE, FL 33470

Title: S ( ) Delete
Name: JACOBS, LINDSEY SEC'Y
Address: 14232 86 NORTH
City-St-Zip: LOXAHATCHEE, FL 33470 BR

Title: T ( ) Delete
Name: JACOBS, ZACHARY TEASURE
Address: 14232 86 NORTH
City-St-Zip: LOXAHATCHEE, FL 33470 BR

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: JACOBS, RONALD
Address: 14232 86 NORTH
City-St-Zip: LOXAHATCHEE, FL 33470 PB

Title: S (X) Change ( ) Addition
Name: JACOBS, LINDSEY SEC'Y
Address: 14232 86 NORTH
City-St-Zip: LOXAHATCHEE, FL 33470 PB

Title: T (X) Change ( ) Addition
Name: JACOBS, ZACHARY TEASURE
Address: 14232 86 NORTH
City-St-Zip: LOXAHATCHEE, FL 33470 PB

Title: VP ( ) Change (X) Addition
Name: JACOBS, CAROL A VP
Address: 14232 86RD. NORTH
City-St-Zip: LOXAHATCHEE, FL 33470 PB

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: RONALD W. JACOBS D 04/29/2005

Electronic Signature of Signing Officer or Director — Date