

Jun.30. 2005 2:31PM

No.6466 P. 1

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 05, 2005 08:00 AM
Secretary of State

DOCUMENT # P01000026043

1. Entity Name
J & R MANAGEMENT INC.



Principal Place of Business

**14 NORTH DRIVE
KEY LARGO, FL 33037**

Mailing Address

**14 NORTH DRIVE
KEY LARGO, FL 33037**



08302005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1097773

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**ROBINSON, JAMES E III
14 NORTH DRIVE
KEY LARGO, FL 33037**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent (and title if applicable).

(NOTE: Registered Agent signature required when re-registering)

DATE

U00000370631
07/05/05-80024-008 150.00

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	ROBINSON, JAMES E III
STREET ADDRESS	14 NORTH DRIVE
CITY-ST-ZIP	KEY LARGO, FL 33037
TITLE	VD
NAME	ROBINSON, ROBIN G
STREET ADDRESS	14 NORTH DRIVE
CITY-ST-ZIP	KEY LARGO, FL 33037
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**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)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James E. Robinson, III President

6/30/05
Date

305 4513688
Daytime Phone #