


2005 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
Apr 28, 2005 08:00 AM
Secretary of State

DOCUMENT # P01000027774
 1. Entity Name
 RHODEN & RHODEN ENTERPRISES, INC.



Principal Place of Business 1195 SOUTH 6TH STREET MACCLENNY, FL 32063	Mailing Address RT 1 BOX 2360 SAINT GEORGE, GA 31646
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04132005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3720953	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BLOOMER'S TAX SERVICE
 4429 CR 218 W
 MIDDLEBURG, FL 32068

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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 _____ (NOTE Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RHODEN, WILLIAM III RR 1 BOX 2360 ST GEORGE, GA 31646
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RHODEN, KATHRYN RR 1 BOX 2360 ST GEORGE, GA 31646
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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: William Rhoden III 4/24/05 912-943-8624
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
 804-759-8027