

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Apr 25, 2006 08:00 AM
Secretary of State**

DOCUMENT # P01000111704

1. Entity Name

R&J BOWERS ENTERPRISES, INC.



Principal Place of Business

**1959 B 7 B RD
WESTVILLE, FL 32464**

Mailing Address

**PO BOX 760
GENEVA, AL 36340-0760**



01052006

No Chg-P

CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

58-2664294

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**ELLENBURG, LISA
1136 ENGLISH LANE
WESTVILLE, FL 32464**

**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 reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

**U00000533179
05/06/06-80115-005 150.00**

10. OFFICERS AND DIRECTORS

| | |
|-----------------|---------------------|
| TITLE | P |
| NAME | BOWERS, RONNIE |
| STREET ADDRESS | 1959 B TO B ROAD |
| CITY - ST - ZIP | WESTVILLE, FL 32464 |
| TITLE | ST |
| NAME | BOWERS, JEANNETTE |
| STREET ADDRESS | 1959 B TO B ROAD |
| CITY - ST - ZIP | WESTVILLE, FL 32464 |
| 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 exemptions contained in Chapter 119, 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: *Ronnie Bowers* Ronnie Bowers 4 - -06 (850-956-2423
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #