

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000111864

FILED
May 04, 2005
Secretary of State

Entity Name: R&D COMMUNICATION SERVICES, INC.

Current Principal Place of Business:

2550 NE 36TH AVENUE
STE E
OCALA, FL 34470

New Principal Place of Business:

Current Mailing Address:

PO BOX 830667
OCALA, FL 34483

New Mailing Address:

FEI Number: 80-0008893

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DONNELLY, RONALD
2550 NE 36TH AVE STE E
OCALA, FL 34470 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

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: DONNELLY, KEITH
Address: 3785 NE 17TH AVE
City-St-Zip: OCALA, FL 34479

Title: P () Delete
Name: DONNELLY, RONALD
Address: 5740 SE 22ND PLACE
City-St-Zip: OCALA, FL 34471

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

SIGNATURE: ROANLD DONNELLY

PRES

05/04/2005

Electronic Signature of Signing Officer or Director

Date