

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 31, 2006 08:00 AM
Secretary of State

DOCUMENT # P02000005065

1. Entity Name

REED BUILDERS GROUP, INC.



Principal Place of Business

101 BURNS LN.
WINTER HAVEN, FL 33884 US

Mailing Address

101 BURNS LN.
WINTER HAVEN, FL 33884 US



01212006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
01-0590992

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

BENNETT, BARRY W
60 SECOND ST. SE
WINTER HAVEN, FL 33880

**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 terminating)

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

000000411444
02/10/06-80008-007 150.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
REED, WILLIAM G
103 BURNS LN.
WINTER HAVEN, FL 33884

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
REED, JAN G
103 BURNS LN.
WINTER HAVEN, FL 33884

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
REED, BRETT A
1335 GRAND CAYMAN CIR.
WINTER HAVEN, FL 33884

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
REED, CHRISTOPHER
2600 LUCERNE PARK RD., #508
WINTER HAVEN, FL 33881

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-26-2006