

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 17, 2007 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



01092007 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 re-registering)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

**10. OFFICERS AND DIRECTORS**

TITLE	D
NAME	REED, WILLIAM G
STREET ADDRESS	103 BURNS LN.
CITY-ST-ZIP	WINTER HAVEN, FL 33884
TITLE	D
NAME	REED, JAN G
STREET ADDRESS	103 BURNS LN.
CITY-ST-ZIP	WINTER HAVEN, FL 33884
TITLE	D
NAME	REED, BRETT A
STREET ADDRESS	1335 GRAND CAYMAN CIR.
CITY-ST-ZIP	WINTER HAVEN, FL 33884
TITLE	D
NAME	REED, CHRISTOPHER
STREET ADDRESS	2600 LUCERNE PARK RD., #508
CITY-ST-ZIP	WINTER HAVEN, FL 33881
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000588767  
01/17/07-80084-018 150.00

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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 #