

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000031744

Entity Name: C. REID ENTERPRISES, INC.

FILED
Jun 30, 2005
Secretary of State

Current Principal Place of Business:

3073 ROYAL PALM AVENUE
FORT MYERS, FL 33901

New Principal Place of Business:

Current Mailing Address:

3073 ROYAL PALM AVENUE
FORT MYERS, FL 33901

New Mailing Address:

FEI Number: 04-3638069

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REID, CYPRIAN
3073 ROYAL PALM AVENUE
FORT MYERS, FL 33901 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: D () Delete
Name: REID, CYPRIAN
Address: 3073 ROYAL PALM AVENUE
City-St-Zip: FORT MYERS, FL 33901

Title: D () Delete
Name: REID, CARL
Address: 4740 27TH ST SW
City-St-Zip: LEHIGH ACRES, FL 33971

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: CYPRIAN REID

PRES

06/30/2005

Electronic Signature of Signing Officer or Director

Date