

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000065345

FILED  
Mar 26, 2005  
Secretary of State

Entity Name: JE RHODES ENTERPRISES, INC.

## Current Principal Place of Business:

3512 MUD LAKE ROAD  
PLANT CITY, FL 33566

## New Principal Place of Business:

## Current Mailing Address:

3512 MUD LAKE ROAD  
PLANT CITY, FL 33566

## New Mailing Address:

FEI Number: 02-0619862

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DOUGHERTY, LINDA  
2815 MANOR HILL DRIVE  
BRANDON, FL 33511 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: RHODES, JEREMIAH E  
Address: 3512 MUD LAKE ROAD  
City-St-Zip: PLANT CITY, FL 33567

Title: MD ( ) Delete  
Name: RHODES, ALICIA M  
Address: 3512 MUD LAKE ROAD  
City-St-Zip: PLANT CITY, FL 33566

## 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: ALICIA M RHODES

MD

03/26/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date