2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2005
Secretary of State

DOCUMENT# P02000074311

Entity Name: J R ROBERTS', INC.

Current Principal Place of Business:

439 TAMIAMI TRAIL S
#206
VENICE, FL 34285

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2132
VENICE, FL 34284

New Mailing Address:

FEI Number: 04-3697791 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DOYLE, ROBERT
439 TAMIAMI TRAIL S
VENICE, FL 34285 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: DOYLE, ROBERT
Address: 805 RIVIERA ST
City-St-Zip: VENICE, FL 34285

Title: D ( ) Delete
Name: DOYLE, JACQUALYNNE
Address: 805 RIVIERA ST
City-St-Zip: VENICE, FL 34285

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: DOYLE, ROBERT
Address: 145 HASKETT ROAD
City-St-Zip: NOKOMIS, FL 34275

Title: D (X) Change ( ) Addition
Name: DOYLE, JACQUALYNNE
Address: 145 HASKETT ROAD
City-St-Zip: NOKOMIS, FL 34275

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: JACQUALYNNE DOYLE VP 04/22/2005

Electronic Signature of Signing Officer or Director — Date