2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Secretary of State DOCUMENT # P02000081859 1. Entity Name MR. RODGERS NEIGHBORHOOD, INC. Mailing Address Principal Place of Business 30 BAYOU DRIVE 30 BAYOU DRIVE FT. WALTON BEACH, FL 32547 FT. WALTON BEACH, FL 32547 03042005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 30-0106338 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RODGERS, GREGORY DO NOT WRITE 30 BAYOU DRIVE FT, WALTON BEACH, FL 32547 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 little if applicable (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIFFECTORS 10 TITLE NAME RODGERS, GREGORY STREET ADDRESS 30 BAYOU_DRIVE FT. WALTON BEACH, FL 32547 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 0000000337955 04/28705-80016-017 150.00 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-\$T-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TOLE NAME STREET ADDRESS City - ST-ZIP 12. Thereby certify that the information supplied with this filing does not qualify 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 signature shall have the same legal effect as if made under cath, 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.

ITED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Apr 28, 2005 08:00 AM