

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000005076

Entity Name: RAYMOND TAYLOR FENCING, INC.

FILED
Aug 25, 2005
Secretary of State

Current Principal Place of Business:

2169 SWAN DRIVE
PORT ORANGE, FL 32128

New Principal Place of Business:

Current Mailing Address:

2169 SWAN DRIVE
PORT ORANGE, FL 32128

New Mailing Address:

FEI Number: 02-0667517

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAYLOR, RAYMOND L
2169 SWAN DRIVE
PORT ORANGE, FL 32128 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TAYLOR, RAYMOND L
Address: 2169 SWAN DRIVE
City-St-Zip: PORT ORANGE, FL 32128

Title: D () Delete
Name: TAYLOR, DONNA M
Address: 2169 SWAN DRIVE
City-St-Zip: PORT ORANGE, FL 32128

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: TAYLOR, RAYMOND L
Address: 2169 SWAN DRIVE
City-St-Zip: PORT ORANGE, FL 32128

Title: P (X) Change () Addition
Name: TAYLOR, DONNA M
Address: 2169 SWAN DRIVE
City-St-Zip: PORT ORANGE, FL 32128

Title: ST () Change (X) Addition
Name: TAYLOR, RYAN L S/T
Address: 2169 SWAN DR
City-St-Zip: PORT ORANGE, FL 32128 US

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: DONNA M TAYLOR

P

08/25/2005

Electronic Signature of Signing Officer or Director

Date