

**2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P03000024270

**FILED**  
**Sep 08, 2007**  
**Secretary of State****Entity Name:** R.N.J. HOLDINGS OF LEE COUNTY INC.**Current Principal Place of Business:**6900 DANIELS RD  
C/O POTTS SPORTS CAFE  
FORT MYERS, FL**New Principal Place of Business:**6900 DANIELS RD  
C/O POTTS SPORTS CAFE  
FORT MYERS, FL 33912**Current Mailing Address:**P O BOX 60824  
C/O POTTS SPORTS CAFE  
FORT MYERS, FL 33906**New Mailing Address:****FEI Number:** 13-4270981      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**HUNSUCKER, JEFFERY  
20230 CYPRESS CK DR  
ALVA, FL 33920 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:** DST      ( ) Delete  
**Name:** HUNSUCKER, JEFFERY  
**Address:** 20230 CYPRESS CK DR  
**City-St-Zip:** ALVA, FL 33920**Title:** P      (X) Delete  
**Name:** REYNOLDS, RICHARD  
**Address:** 6900 DANIELS PKY # 26  
**City-St-Zip:** FT MYERS, FL 33912**Title:** V      (X) Delete  
**Name:** BARKER, RICHARD S  
**Address:** 6900 DANIELS PKY # 26  
**City-St-Zip:** FT MYERS, FL 33912**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PST      (X) Change ( ) Addition  
**Name:** HUNSUCKER, JEFFERY  
**Address:** 20230 CYPRESS CK DR  
**City-St-Zip:** ALVA, FL 33920**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 exemption stated in Chapter 119, 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: JEFFERY L HUNSUCKER

PST

09/08/2007

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