

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000026588

FILED
May 05, 2005
Secretary of State

Entity Name: R & J RENTALS OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

415 ATLANTIS DR
SATELLITE BEACH, FL 32937

New Principal Place of Business:

460 CARDINAL DRIVE
SATELLITE BEACH, FL 32937

Current Mailing Address:

415 ATLANTIS DR
SATELLITE BEACH, FL 32937

New Mailing Address:

460 CARDINAL DRIVE
SATELLITE BEACH, FL 32937

FEI Number: 05-0553210

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GROVE, JOHN C
415 ATLANTIS DR
SATELLITE BEACH, FL 32937 US

Name and Address of New Registered Agent:

GROVE, JOHN C
460 CARDINAL DRIVE
SATELLITE BEACH, FL 32937 US

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:

05/05/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GROVE, JOHN C
Address: 415 ATLANTIS DRIVE
City-St-Zip: SATELLITE BEACH, FL 32937

Title: S () Delete
Name: GROVE, MONIQUE D
Address: 415 ATLANTIS DRIVE
City-St-Zip: SATELLITE BEACH, FL 32937

Title: V () Delete
Name: ORAM, RICK
Address: 509 LINDA LN
City-St-Zip: MELBOURNE, FL 32935

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change () Addition
Name: GROVE, JOHN C
Address: 460 CARDINAL DRIVE
City-St-Zip: SATELLITE BEACH, FL 32937

Title: S (X) Change () Addition
Name: GROVE, MONIQUE D
Address: 460 CARDIANL DRIVE
City-St-Zip: SATELLITE BEACH, FL 32937

Title: P (X) Change () Addition
Name: ORAM, RICK
Address: 509 LINDA LN
City-St-Zip: MELBOURNE, FL 32935

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: MONIQUE GROVE

S

05/05/2005

Electronic Signature of Signing Officer or Director

Date