

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000048920

FILED  
Apr 28, 2005  
Secretary of State

Entity Name: DELIVERY & DISTRIBUTION INC.

## Current Principal Place of Business:

6163 IVY HILL LANE  
BROOKSVILLE, FL 34602

## New Principal Place of Business:

31741 GUDE RD  
DADE CITY, FL 33525 US

## Current Mailing Address:

6163 IVY HILL LANE  
BROOKSVILLE, FL 34602

## New Mailing Address:

31741 GUDE RD  
DADE CITY, FL 33525 US

FEI Number: 90-0151145

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

REYNOLDS, KELLY  
6163 IVY HILL LANE  
BROOKSVILLE, FL 34602 US

## Name and Address of New Registered Agent:

REYNOLDS, KELLY  
31741 GUDE RD  
DADE CITY, FL 34602 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:

04/28/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: REYNOLDS, KELLY  
Address: 6163 IVY HILL LANE  
City-St-Zip: BROOKSVILLE, FL 34602

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: REYNOLDS, KELLY  
Address: 31741 GUDE RD  
City-St-Zip: DADE CITY, FL 33525

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: KELLY REYNOLDS

D

04/28/2005

Electronic Signature of Signing Officer or Director

Date