2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jun 22, 2005
Secretary of State

DOCUMENT# P03000070275

Entity Name: R. & R. PROPERTIES OF CENTRAL FLORIDA INC.

Current Principal Place of Business:

18 NOTRE DAME STREET
LAKE PLACID, FL 33852

New Principal Place of Business:

Current Mailing Address:

18 NOTRE DAME STREET
LAKE PLACID, FL 33852

New Mailing Address:

FEI Number: 59-0694608 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RAHIG, GILBERT
18 NOTRE DAME STREET
LAKE PLACID, FL 33852 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: PD ( ) Delete
Name: RAHRIG, GILBERT
Address: 18 NOTRE DAME STREET
City-St-Zip: LAKE PLACID, FL 33852

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: RAHRIG, GILBERT
Address: 18 NOTRE DAME STREET
City-St-Zip: LAKE PLACID, FL 33852

Title: VP ( ) Change (X) Addition
Name: BLACK, BARBARA
Address: 18 NOTRE DAME STREET
City-St-Zip: LAKE PLACID, FL 33852

Title: D ( ) Change (X) Addition
Name: BLACK, BARBARA
Address: 18 NOTRE DAME STREET
City-St-Zip: LAKE PLACID, FL 33852

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: BARBARA BLACK D 06/22/2005

Electronic Signature of Signing Officer or Director — Date