


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000141558
 1. Entity Name
R&K2, INC.



Principal Place of Business
**215 FOXWOOD ROAD
 DEATSVILLE, AL 36022**

Mailing Address
**215 FOXWOOD ROAD
 DEATSVILLE, AL 36022**

DO NOT WRITE IN THIS SPACE



04222006 No Chg-P CR2E034 (11/05)

4. FEI Number
20-0428458

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**EMERY, MARK W
 918 W. DIXIE AVENUE
 LEESBURG, FL 34748**

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

1110100537247
 05/09/06-80011-004 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SCHULER, ROGER L 215 FOXWOOD ROAD DEATSVILLE, AL 36022
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC SCHULER, ROGER L 215 FOXWOOD ROAD DEATSVILLE, AL 36022
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREA SCHULER, ROGER L 215 FOXWOOD ROAD DEATSVILLE, AL 36022
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Roger L Schuler* **4/22/06** **234-285-7434**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #