

2005  
**2004 FOR PROFIT CORPORATION  
 ANNUAL REPORT**

**FILED**  
**Sep 06, 2005 8:00 am**  
**Secretary of State**

09-06-2005 90137 004 \*\*\*150.00

**50065148**



<b>DOCUMENT # P03000142276</b> 1. Entity Name <b>JWR ENG CONST CORP</b>						
Principal Place of Business <b>30841 CHEROKEE AVE          LEESBURG, FL 34748 US</b>			Mailing Address <b>30841 CHEROKEE AVE          LEESBURG, FL 34748 US</b>			
2. Principal Place of Business		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.				
City & State		City & State				
Zip		Country		Zip		
				Country		
4. FEI Number <b>412117644</b>				Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75</b> Additional Fee Required		
6. Name and Address of Current Registered Agent  <b>REEDY, WARREN          30841 CHEROKEE AVE          LEESBURG, FL 34748</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>			
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>						
<b>FILE NOW!!! FEE IS \$150.00          Due by September 8, 2004</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees		
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.						
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>D</b> <b>REEDY, WARREN</b> <b>30841 CHEROKEE AVE</b> <b>LEESBURG, FL 34748</b>		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>P=TD</b> <b>JANISA Reedy</b> <b>30841 Cherokee Ave</b> <b>Leesburg FL 34748</b>	
				<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>D</b> <b>HOLLAND, RICHARD</b> <b>30841 CHEROKEE AVE</b> <b>LEESBURG, FL 34748</b>		<input checked="" type="checkbox"/> Delete			
				<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP			<input type="checkbox"/> Delete			
				<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP			<input type="checkbox"/> Delete			
				<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP			<input type="checkbox"/> Delete			
				<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify 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 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.						
<b>SIGNATURE:</b>						
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <b>Setp 2 - 2005</b> Daytime Phone # <b>352-308-7310</b>			

ATTACHMENT SD065148  
# PO3000142276

TO  
STATE of Florida

We did NOT Received The 2005 CORPORATION  
ANNUAL REPORT FORM FOR JWR ENG CONST CORP

THANK YOU

Warren Reed,

