
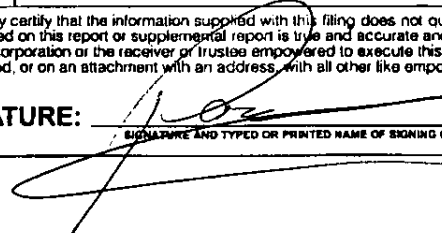


FILED
Jun 01, 2007 8:00 am
Secretary of State

05-09-2007 90104 049 ***150.00

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

5/5

DOCUMENT # P03000145214		
1. Entity Name REYNOLDS ENTERPRISES INC.		
Principal Place of Business 1106 E JULIA ST PERRY, FL 32347		Mailing Address 1106 E JULIA ST PERRY, FL 32347
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent COULTHURST, BARBARA 172 W MAIN ST MAYO, FL 32066		
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 _____ (NOTE: Registered Agent Signature required when re-registering) _____ DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES REYNOLDS, PAUL W MR 1106 E JULIA ST PERRY, FL 32347	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SE/T REYNOLDS, JANET T MRS 1106 E JULIA ST PERRY, FL 32347	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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: 		Date 4/25/07 Daytime Phone 850 584-2340

66017414



04252007 No Chg-P CR2E034 (11/05)

4. FEI Number 20-0483775	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

**DO NOT WRITE
IN THIS SPACE**

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IN THIS SPACE**