


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 22, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000145261 1. Entity Name JAMES F RICE INC.	
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Principal Place of Business 744 KELLY STREET DESTIN, FL 32541 US	Mailing Address PO BOX 1600 DESTIN, FL 32540 US
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03102005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0453015	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent FANELLA, NICHOLAS R 434 TANGLEWOOD COURT FORT WALTON BEACH, FL 32547	DO NOT WRITE IN THIS SPACE
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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: Nicholas R. FANELLA Nicholas R. FANELLA 4/18/05
Signature, typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD RICE, JIM F 744 KELLY STREET DESTIN, FL 32541
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD HARP, MICHAEL L 744 KELLY STREET DESTIN, FL 32541
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP RICE, FRANCIS C 744 KELLY STREET DESTIN, FL 32541
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04/22/05-80006-010 150.00

**DO NOT WRITE
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: James F Rice James F. Rice 4/20/05 850 9742901
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone