

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 02, 2006 8:00 am**  
**Secretary of State**

02-02-2006 90075 050 \*\*\*158.75

**DOCUMENT # P04000003925**

1. Entity Name

J.R. RESIDENTIAL, INC.



Principal Place of Business

6909 NORTH LAGOON DRIVE  
UNIT D-2  
PANAMA CITY BEACH FL 32408

Mailing Address

6909 NORTH LAGOON DRIVE  
UNIT D-2  
PANAMA CITY BEACH FL 32408



2. Principal Place of Business

6323 PALM COURT

Suite, Apt. #, etc.

3. Mailing Address

6323 PALM COURT

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/05)

City & State

PANAMA CITY BEACH FL

City & State

PANAMA CITY BEACH FL

4. FEI Number

20-0566137

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WILLIAMS, JACK G  
502 HARMON AVENUE  
PANAMA CITY FL 32401

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE D  
NAME REHONIC, JOSEPH  
STREET ADDRESS 6909 NORTH LAGOON DRIVE, UNIT D-2  
CITY-ST-ZIP PANAMA CITY BEACH, FL 32408 ☐ Delete

TITLE P  
NAME THOMPSON, RUSSELL  
STREET ADDRESS 6909 NORTH LAGOON DR B-4  
CITY-ST-ZIP PANAMA CITY FL 32408 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS 6323 PALM COURT  
CITY-ST-ZIP PANAMA CITY BEACH FL 32408 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Joseph Rehonic 1-23-06 850 527 9926