

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000084536

Entity Name: J.R. ELY INC.

FILED
Jun 17, 2005
Secretary of State

Current Principal Place of Business:

P.O. BOX 34
PONCE DE LEON, FL 32455

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 34
PONCE DE LEON, FL 32455

New Mailing Address:

FEI Number: 87-0728859

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELY, CLYDE G
3640 CATFISH ALLEY
VERNON, FL 32462 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ELY, CLYDE G
Address: P.O. BOX 34
City-St-Zip: PONCE DE LEON, FL 32455

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: PORTER, CARLOS E
Address: 2928 CLAYHILL LANE
City-St-Zip: PONCE DE LEON, FL 32455

Title: O () Change (X) Addition
Name: ALBRITTON, JOHNATHAN
Address: 1544 GOVERNMENT ST
City-St-Zip: PONCE DE LEON, FL 32455

Title: O () Change (X) Addition
Name: EARNEST, SOLON L
Address: 3650 CATFISH ALLEY
City-St-Zip: VERNON, FL 32462

Title: O () Change (X) Addition
Name: ELY, DANIEL
Address: 1544 GOVERNMENT ST
City-St-Zip: PONCE DE LEON, FL 32455

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CLYDE G ELY

D

06/17/2005

Electronic Signature of Signing Officer or Director

Date