## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000092807

Title:

Name:

Address:

City-St-Zip:

() Delete

FILED Apr 20, 2005 Secretary of State

Entity Name: R&LINVE	ESTORS, INC.			
Current Principal Place of Business:		New Principal Place of Business:		
2752 RAINBOW CICRLE JACKSONVILLE, FL 3221				
Current Mailing Address:		New Mailing Address:		
2752 RAINBOW CICRLE JACKSONVILLE, FL 3221				
FEI Number: 16-1701724	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:				
JAMES A. NOLAN, P.A. 4114 HERSCHEL STREE JACKSONVILLE, FL 3221				
The above named entity si in the State of Florida.	ubmits this statement for the p	ourpose of changing its registe	ered office or registered agent, or both,	
SIGNATURE:				
Electronic Signature of Registered Agent Date			Date	
Election Campaign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:		ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: ( ) I Name: Address: City-St-Zip:	Delete	Address: 2752RAI	() Change (X) Addition OBERT A PD NBOW CIRCLE NORTH NVILLE, FL 33317	

Title:

Name:

Address:

City-St-Zip:

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: LABRENDA LEE LONG **VSD** 04/20/2005

( ) Change (X) Addition

LONG, LABRENDAP L VSD

JACKSONVILLE, FL 32217

2752 RAINBOW CIRCLE NORTH