


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2006 8:00 am
Secretary of State

03-03-2006 90107 017 ***150.00

DOCUMENT # P05000075875		
1. Entity Name R.J.F. DEVELOPERS, INC.		

Principal Place of Business 7165 NE 3RD STREET OCALA, FL 34470 US	Mailing Address 7165 NE 3RD STREET OCALA, FL 34470 US
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2. Principal Place of Business 4410 SE 11th Pl	3. Mailing Address 4410 SE 11th Pl.
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Ocala, FL	City & State Ocala, FL	4. FEI Number 20-2902440	Applied For Not Applicable
Zip 34471	Country U.S.	Zip 34471	Country U.S.

02032006 Chg-P CR2E034 (11/05)

6. Name and Address of Current Registered Agent ODOM, DANNY R 1909 NE 52ND STREET OCALA, FL 34479	
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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 Raymond J. Fowler 2-13-06
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered agent signature required when installing) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 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	P FOWLER, RAYMOND 7165 NE 3RD STREET OCALA, FL 34470 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FOWLER, RAYMOND 7165 NE 3RD STREET OCALA, FL 34470 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC FOWLER, RAYMOND 7165 NE 3RD STREET OCALA, FL 34470 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREA FOWLER, RAYMOND 7165 NE 3RD STREET OCALA, FL 34470 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Fowler, Raymond J. 4410 SE 11th Pl. Ocala, FL 34471 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Fowler, Raymond J. 4410 SE 11th Pl. Ocala, FL 34471 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Fowler, Raymond J. 4410 SE 11th Pl. Ocala, FL 34471 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Raymond J. Fowler 2-13-06 352-572-9308
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment
40023510
POS000075875

as part for your i

CP

Return this part with any correspondence
so we may identify your account. Please
correct any errors in your name or address.

CP 575 A

0134108595

Your Telephone Number

Best Time to Call

DATE OF THIS NOTICE: 06-08-2005

(352) 572-9305

8am-6pm

EMPLOYER IDENTIFICATION NUMBER: 20-2902440

FORM: SS-4

NOBOD

INTERNAL REVENUE SERVICE
P.O. BOX 9003
HOLTSVILLE NY 11742-9003
[Barcode]

RJF DEVELOPERS INC
7165 NE 3RD ST
OCALA FL 34470