


2005 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
Feb 16, 2005 08:00 AM
Secretary of State

DOCUMENT # P93000049354
 1. Entity Name
J & R OUTFITTERS, INC.



Principal Place of Business Mailing Address
 7600 SW FOX BROWN 7600 SW FOX BROWN
 INDIANTOWN, FL 34956 US INDIANTOWN, FL 34956 US

DO NOT WRITE IN THIS SPACE



01192005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0422842	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CASTER, JIM
 2145 15TH AVE
 VERO BCH, FL 32961

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D O'BANNON, FLOYD J 7600 SW FOX BROWN INDIANTOWN, FL 34956
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D O'BANNON, ELIZABETH 7600 FOX BROWN INDIANTOWN, FL 34956
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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)(j), 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: *Elizabeth O'Bannon* Elizabeth O'Bannon 2-10-05 772-5974759
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #