


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 08:00 AM
Secretary of State

DOCUMENT # P95000012614	
1. Entity Name RANDALL & RANDALL, INC.	

Principal Place of Business 3451 W. BEAVER ST. JACKSONVILLE, FL 32205	Mailing Address 6508 KIN LOCK DR. W. JACKSONVILLE, FL 32219
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DO NOT WRITE IN THIS SPACE

04212005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3365379	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**RANDALL, SHERMAN L
6508 KIN LOCK DR. W.
JACKSONVILLE, FL 32219**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000351903 05/03/05-80006-020 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CLARK, JACOUCHINE 7919 DWYERS DRIVE JACKSONVILLE, FL 32205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RANDALL, DORIS G 6508 KINLOCK DR W JACKSONVILLE, FL 32219
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Doris G. Randall* **4-25-05** **904-7681890**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #