## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 15, 2004 8:00 am Secretary of State **DOCUMENT # P95000088489** 04-15-2004 90064 001 \*\*\*450.00 R.E.E. HOLDINGS, INC. Principal Place of Business Mailing Address 19150 PARK PLACE BLVD 19150 PARK PLACE BLVD 66411985 EUSTIS, FL 32736 EUSTIS, FL 32736 2. Principal Place of Business 3. Mailing Address Suite. Apt. #, etc. Suite, Apt. #, etc. 04052004 CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 59-3153984 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Ebert, KOBERT E EBERT, ROBERT E JR Street Address (P.O. Box Number is Not Acceptable) 136 BAYTREE BLVD TAVARES, FL 32778 tark t 'lace 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 Fjor da. I am familiar with, and accept the obligations of registered agent 40 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. BUE ☐ Delete TITLE Ebert, Robert E. Jo EBERT, ROBERT E JR KAME NAME 19150 PARK Place BIVD 136 BAYTREE BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TAVARES, FL 32778 CITY-ST-ZIP Eustis, Fl 32736 TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition HALIF MANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7/P TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Addition TITLE TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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: Y

NG OFFICER OR DIRECTOR

**FILED**