## ~2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## FILED Apr 14, 2005 08:00 AM Secretary of State

1. Entity Nan	RA PROPERTIES, INC.	 			Sec	retary of State	
Principal Place of Business Mailing Address 3003 SOUTH ATLANTIC AVE., 16A 1 3003 SOUTH ATLANTIC AVE., 16A DAYTONA BEACH, FL 32118 DAYTONA BEACH, FL 32118							
		2	·				
DO NOT WRITE IN THIS SPACE				03122005 4. FEI Numb	03122005 No Chg-P CR2E034 (10/03)  4. FEI Number Applied For		
				59-340	59-3402452 Not Applicable  5. Certificate of Status Desired \$8.75 Additional		
Name and Address of Current Registered Agent						Fee Required	
CORR, KEVIN J 3003 SOUTH ATLANTIC AVE., 16A 1 DAYTONA BEACH, FL 32118				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							
Signature, typen or rogistered agent and ritle if applicable (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 Financi Trust Fund Contribution.				5.00 May Be ided to Fees			
10. TITLE	OFFICERS AND DIRE	CTORS					
NAME STREET ADDRESS CITY-ST-ZIP	CORR, KEVIN J 3003 SOUTH ATLANTIC AVE., 16A 1 DAYTONA BEACH, FL 32118				U00000 1147147115-	)304365 -80040-001 150.00	
TITLE NAME STREET ADDRESS CITY-SY-ZIP							
TITLE NAME STREET ADDRESS CITY- ST-ZIP				DO	NOT W	RITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN -	THIS SP	ACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS GITY-ST-ZIP							
12. I hereby certify that the information supplied with this filling 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 trusted 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.							