

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000025510

Entity Name: RECREATIONAL CAPITAL, INC.

FILED
Apr 26, 2005
Secretary of State

Current Principal Place of Business:

787 S.E. PORT ST LUCIE BLVD
PORT ST. LUCIE, FL 34984

New Principal Place of Business:

3251 OLEANDER BLVD.
FT. PIERCE, FL 34982

Current Mailing Address:

787 S.E. PORT ST LUCIE BLVD
PORT ST. LUCIE, FL 34984

New Mailing Address:

3251 OLEANDER BLVD.
FT. PIERCE, FL 34982

FEI Number: 59-3434382

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOWLER, MARGARET E
787 S.E. PORT ST LUCIE BLVD
PORT ST. LUCIE, FL 34984 US

Name and Address of New Registered Agent:

FOWLER, MARGARET E
3251 OLEANDER BLVD.
FT. PIERCE, FL 34982 US

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.

SIGNATURE: MARGARET E. FOWLER

04/26/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FOWLER, JOHN S
Address: 787 S.E. PORT ST. LUCIE BLVD
City-St-Zip: PORT ST. LUCIE, FL 34984

Title: VP () Delete
Name: FOWLER, MARGARET E
Address: 787 S.E. PORT ST LUCIE BLVD
City-St-Zip: PORT ST. LUCIE, FL 34984

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FOWLER, JOHN S
Address: 3251 OLEANDER BLVD.
City-St-Zip: FT. PIERCE, FL 32982

Title: VP (X) Change () Addition
Name: FOWLER, MARGARET E
Address: 3251 OLEANDER BLVD.
City-St-Zip: FT. PIERCE, FL 34982

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN S. FOWLER

PRES

04/26/2005

Electronic Signature of Signing Officer or Director

Date