2005 FOR PROFIT CORPORATION

FILED Apr 25, 2005 08:00 AM

ANNOALI	ANNOAL KEFOKI				, 20, 20,	
DOCUMENT # P9700005375 1. Entity Name JAMES C. ROGERS, INC.	58			2	Secreta	ry of State
3041 N.W. 74TH TERRACE	Mailing Address 3041 N.W. 74TH TERRACE OKEECHOBEE, FL 34972			(5)))		
DO NOT WRITE I		CE	04202005 4. FEI Number 65-0768	No Chg-P	CR2E034	
6. Name and Address of Current Regi				<u></u>		
ROGERS, JAMES C 3041 N.W. 74TH TERRACE OKEECHOBEE, FL 34972	-		-	_	WRITE PACE	
8. The above named entity submits this statement for the the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and tille		ed office or register	ed agent, or both	n, in the State of	Fiorida. I am far	niliar with, and accept
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.		.00 May Be ed to Fees	···		
10. OFFICERS AND DIRE	CTORS					
NAME ROGERS, JAMES C STREET ADDRESS 3041 N.W. 74TH TERRACE CITY-ST-ZIP OKEECHOBEE, FL 34972						
TITLE NAME STREET ADDRESS CITY-ST-ZIP				U000 04/25/0	00328629 5-80081-0	20 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT \	NRITE	
TITLE NAME STREET ADDRESS GITY-ST-ZIP					PACE	
TITLE NAME STREET ADDRESS						ļ

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 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.

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP