2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2005
Secretary of State

DOCUMENT# P97000056412

Entity Name: WRF, INC.

Current Principal Place of Business:

1 INDEPENDENT DRIVE
SUITE 2600
JACKSONVILLE, FL 32202

New Principal Place of Business:

ONE INDEPENDENT DRIVE
SUITE 2600
JACKSONVILLE, FL 32202

Current Mailing Address:

1 INDEPENDENT DRIVE
SUITE 2600
JACKSONVILLE, FL 32202

New Mailing Address:

ONE INDEPENDENT DRIVE
SUITE 2600
JACKSONVILLE, FL 32202

FEI Number: 59-3458335 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FISHER, MICHAEL W
1 INDEPENDENT DRIVE
SUITE 2600
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

FISHER, MICHAEL W
ONE INDEPENDENT DRIVE
SUITE 2600
JACKSONVILLE, FL 32202 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: MICHAEL W. FISHER 04/20/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete
Name: LANE, RAYMOND
Address: 244 HOLLY KNOWE ROAD
City-St-Zip: ORANGE PARK, FL 32073

Title: VD ( ) Delete
Name: WEBB, BILLY R
Address: 3640 NEWCOMB ROAD
City-St-Zip: JACKSONVILLE, FL 32218

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition
Name: LANE, RAYMOND L
Address: 244 HOLLY KNOWE ROAD
City-St-Zip: ORANGE PARK, FL 32073

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: RAYMOND L. LANE PSD 04/20/2005
Electronic Signature of Signing Officer or Director Date