2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000054879 1. Entity Name THE R. K. JACKSON CO. Principal Place of Business Mailing Address 3906 HIDDEN ACRES CIR 3906 HIDDEN ACRES CIRCLE NORTH FORT MYERS, FL 33903 FORT MYERS, FL 33903 US

FILED Feb 28, 2005 8:00 am Secretary of State

02-28-2005 90182 013 ***150.00

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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

JACKSON, RICHARD K JR

SIGNATURE:

3380 SOUTH WEST FIRST STREET DEERFIELD BEACH FL 33442

01052005 CR2E034 (10/03)

4. FEI Number 65-0843349

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Dayume Phone #

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, typed or printed name of registered agent and title if applicable. (MOTE: Registered Agent signature required when renistang) OATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JACKSON, RICHARD K JR 3906 HIDDEN ACRES CIRCLE NORTH FORT MYERS, FL 33403	·			
TITLE NAME STREET ADDRESS CITY+ST+ZIP					
TITLE NAME _ STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN .	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
NAME STREET ADDRESS CITY-ST-ZIP	3.4.				
12. I hereby certify that the information supplied with this filting 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.					

NTED NAME OF SIGNING OFFICER OR DIRECTOR