


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 11, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P37368</b> 1. Entity Name R. R. CASSIDY, INC.	
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Principal Place of Business P. O. BOX 80231 BATON ROUGE, LA 70898	Mailing Address P. O. BOX 80231 BATON ROUGE, LA 70898
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01052005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 72-0957920	Applied For Not Applicable
5. Certificate of Status Desired XXX	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  BROWN, FLETCHER 124 NORTH BREWARD AVENUE ARCADIA, FL 33821
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**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 (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 Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CASSIDY, RANDOLPH R. 6565 PIKES LANE BATON ROUGE, LA 70808
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST BOLTON, REBECCA J. 6565 PIKES LANE BATON ROUGE, LA 70808
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1100000177248  
01/11/05-80029-011 158.75

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

**SIGNATURE:** Rebecca Bolton Sec/Treas **Secretary/Treasurer** 1/5/05 225/673-4111  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #