2005 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # 488625

1. Entity Name

JUDICIAL AND ADMINISTRATIVE RESEARCH ASSOCIATES, INC.



Principal Place of Business

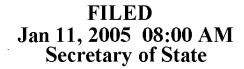
Mailing Address

JARA, INC. 1327 NORTH ADAMS STREET, P O BOX 4284

TALLAHASSEE, FL 32303

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TALLAHASSEE, FL 32303





01102005

No Chg-P

CR2E034 (10/03)

4. FEI Number		Applied For
59-1632256		Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

YOUNG, E. NEIL 1327 NORTH ADAMS STREET TALLAHASSEE, FL 32303

SIGNATURE:

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 Inelabove 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 reinstalling)						DATE		
FILE NOWIII FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.					\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	CTORS _						
TITLE *NAME STREET ADDRESS CITY-ST-ZIP	P YOUNG, EMMETT N. 2876 KILKIORANE DR TALLAHASSEE, FL 32309	•						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S YOUNG, SHARON 2876 KILKIORANE DR TALLAHASSEE, FL 32309					U00000177326 01/11/05-80033-012 150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					IN T	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-\$T-ZIP								
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
12. I hereby certify that the information supplied with this filing 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.								