

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 18, 2007 08:00 AM
Secretary of State**

DOCUMENT # 488625

1. Entity Name
**JUDICIAL AND ADMINISTRATIVE RESEARCH
ASSOCIATES, INC.**



Principal Place of Business

**JARA, INC.
1327 NORTH ADAMS STREET, P O BOX 4284
TALLAHASSEE, FL 32303**

Mailing Address

**JARA, INC.
1327 NORTH ADAMS STREET, P O BOX 4284
TALLAHASSEE, FL 32303**



01082007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1632256

Applied For
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**

**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, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	YOUNG, EMMETT N.
STREET ADDRESS	2876 KILKIORANE DR
CITY - ST - ZIP	TALLAHASSEE, FL 32309
TITLE	S
NAME	YOUNG, SHARON
STREET ADDRESS	2876 KILKIORANE DR
CITY - ST - ZIP	TALLAHASSEE, FL 32309
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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01/19/07-80037-022 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

E. Neil Young
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/18/07

850-222-3,71