

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K66979

FILED  
Apr 04, 2008  
Secretary of State

Entity Name: JACKSON SHIPPING, INC.

**Current Principal Place of Business:**

5353 W. TYSON AVE.  
BLDG C  
TAMPA, FL 33611 US

**New Principal Place of Business:**

**Current Mailing Address:**

5353 W. TYSON AVE.  
BLDG C  
TAMPA, FL 33611 US

**New Mailing Address:**

5353 W. TYSON AVE.  
BLDG D  
TAMPA, FL 33611 US

FEI Number: 59-2945893

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SCOTT, LAWRENCE L ESQ.  
304 PLANT AVE.  
TAMPA, FL 33606 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: JACKSON, ALBERT  
Address: 4704 W CLEAR AVE  
City-St-Zip: TAMPA, FL

Title: DV ( ) Delete  
Name: JACKSON, BONNIE  
Address: 4704 W CLEAR AVE  
City-St-Zip: TAMPA, FL

Title: D ( ) Delete  
Name: JACKSON, ANDREW  
Address: 7605 S OBRIEN ST  
City-St-Zip: TAMPA, FL 33616

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: D (X) Change ( ) Addition  
Name: SHERRYL, MCNAB  
Address: 4704 W CLEAR AVE  
City-St-Zip: TAMPA, FL

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: BONNIE JACKSON

DV

04/04/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date