2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003671

FILED Apr 30, 2006 Secretary of State

Entity Name: THE JUSTICE COALITION, INC.

Current Principal Place of Business: New Principal Place of Business:

1934 LANE AVENUE S. SUITE 1 JACKSONVILLE, FL 32210

Current Mailing Address: New Mailing Address:

1934 LANE AVENUE S. SUITE 1 JACKSONVILLE, FL 32210

FEI Number: 59-3329348 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HOLBROOK, H LEON SMALL BUSINESS ASSOCIATES INC. 1 INDEPENDENT DRIVE SUITE 2301 4070 HERSCHEL ST

JACKSONVILLE, FL 32202 JACKSONVILLE, FL 32210

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: SCOTT ADAMS 04/30/2006

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete HIRES, SR, TED M HIRES, SR, TED M Name: Name: 1935-2 S LANE AVE, SONNY'S BAR-B-QUE DEV Address: 1935-2 S LANE AVE, Address: City-St-Zip: JACKSONVILLE, FL 32210 City-St-Zip: JACKSONVILLE, FL 32210 Title: Title: () Delete () Change () Addition

TAYLOR, LIONEL S REV Name: Name: Address: 111 UNION BLVD NORTH Address: City-St-Zip: JACKSONVILLE, FL 32211 City-St-Zip:

Title: () Delete Title: () Change () Addition

ADAMS, SCOTT Name: Name: 4070 HERSCHEL STREET Address: Address: City-St-Zip: JACKSONVILLE, FL 32210 City-St-Zip:

Title: CD () Delete Title: REV (X) Change () Addition

LEE, DARRAL Name: Name: WIGGINS, GARY 1641 LANDAN AVENUE Address: Address: 1935-2 S LANE AVE, City-St-Zip: JACKSONVILLE, FL 32210 City-St-Zip: JACKSONVILLE, FL 32210

Title: () Delete Title: () Change () Addition

RUTHERFORD, JOHN SHERIFF Name: Name: 501 EAST BAY STREET Address: Address: City-St-Zip: JACKSONVILLE, FL 32202 City-St-Zip:

Title: () Delete Title: () Change () Addition

SLEIMAN, TONEY Name: Name: Address: 1 SLEIMAN PARKWAY, SUITE 270 Address: JACKSONVILLE, FL 32216 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SCOTT ADAMS DT 04/30/2006