## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000080045

FILED Apr 09, 2004 Secretary of State

Entity Na	me: LTSJAX,	INC.				
Current P	rincipal Place	of Business:	New Principa	New Principal Place of Business:		
	CH BLVD., SU IVILLE, FL 322			600 BOX BRANCH CIRCLE JACKSONVILLE, FL 32259		
Current N	lailing Addres	ss:	New Mailing	New Mailing Address:		
5800 BEACH BLVD., SUITE 102 JACKSONVILLE, FL 32207			600 BOX BRANCH CIRCLE JACKSONVILLE, FL 32259			
FEI Number	: 59-3741371	FEI Number Applied For()	FEI Number Not Applicat	ble ( ) Certificate of Status Desired ( )		
Name and	d Address of C	Current Registered Agent:	Name and Ad	Name and Address of New Registered Agent:		
JACKSON	KINGS RD. S. IVILLE, FL 322					
	e named entity : e of Florida.	submits this statement for the	purpose of changing its r	registered office or registered agent, or both,		
SIGNATU	RE:					
	Electror	nic Signature of Registered A	gent	Date		
Election Ca	mpaign Financin	g Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITIONS/0	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D ( ) PEARCE, R. KI 600 BOX BRAN JACKSONVILL	ICH CIR.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	WARNER, JOE	NCE HOLLOW LANE	Title: Name: Address: City-St-Zip:	() Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the 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 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: R. KEITH PEARCE **PRES** 04/09/2004