

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

Jan 24, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000010379

1. Entity Name
THE J2 GROUP INC.



Principal Place of Business
**200 4TH AVE. SOUTH
131
ST. PETERSBURG, FL 33701**

Mailing Address
**200 4TH AVE. SOUTH
131
ST. PETERSBURG, FL 33701**



01182005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
13-3890938

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**CASTELLANO, NELSON T
101 E. KENNEDY BLVD., STE. 2700
TAMPA, FL 33602**

**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, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

U000000130280

01/24/05-80127-013 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	PARKES, JEANNE S
STREET ADDRESS	200 4TH AVE SOUTH # 131
CITY- ST- ZIP	ST. PETERSBURG, FL 33701
TITLE	D
NAME	LATTANZIO, JEANNE M
STREET ADDRESS	11015 DEODAR WAY
CITY- ST- ZIP	RENO, NV 98506
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: JEANNE S. PARKES *Jeanne S. Parkes*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-18-05

Date

7278200843

Daytime Phone #