

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000058991

FILED  
Feb 13, 2008  
Secretary of State

Entity Name: MCJD, INC.

## Current Principal Place of Business:

6215 WILSON BOULEVARD  
JACKSONVILLE, FL 32210 US

## New Principal Place of Business:

5465 VERNA BLVD.  
JACKSONVILLE, FL 32205 US

## Current Mailing Address:

P.O. BOX 441149  
JACKSONVILLE, FL 32222 US

## New Mailing Address:

P.O. BOX 6898  
JACKSONVILLE, FL 32236 US

FEI Number: 81-0615364

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BRANNEN, WILLIAM  
6215 WILSON BOULEVARD  
JACKSONVILLE, FL 32210 US

## Name and Address of New Registered Agent:

BRANNEN, WILLIAM  
5465 VERNA BLVD  
JACKSONVILLE, FL 32205 US

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: WILLIAM M. BRANNEN

02/13/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: JAMES, K.M.  
Address: 6215 WILSON BOULEVARD  
City-St-Zip: JACKSONVILLE, FL 32210

Title: D ( ) Delete  
Name: FRESHWATER, CHARLES D  
Address: 6215 WILSON BOULEVARD  
City-St-Zip: JACKSONVILLE, FL 32210

Title: D ( ) Delete  
Name: DANTZLER, JOEL A  
Address: 6215 WILSON BOULEVARD  
City-St-Zip: JACKSONVILLE, FL 32210

Title: D ( ) Delete  
Name: REWIS, A. DARONNE  
Address: 6215 WILSON BOULEVARD  
City-St-Zip: JACKSONVILLE, FL 32210

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: JAMES, K.M.  
Address: 5465 VERNA BLVD.  
City-St-Zip: JACKSONVILLE, FL 32205

Title: D (X) Change ( ) Addition  
Name: FRESHWATER, CHARLES D  
Address: 5465 VERNA BLVD.  
City-St-Zip: JACKSONVILLE, FL 32205

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

Title: D (X) Change ( ) Addition  
Name: REWIS, A. DARONNE  
Address: 5465 VERNA BLVD.  
City-St-Zip: JACKSONVILLE, FL 32205

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: K.M. JAMES

D

02/13/2008

Electronic Signature of Signing Officer or Director

Date