## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000093703

Entity Name: JEFFREY CHARLES INC.

FILED Mar 10, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 200 S ORANGE AVE - STE 2600 ORLANDO, FL 32801 **Current Mailing Address: New Mailing Address:** 200 S ORANGE AVE - STE 2600 ORLANDO, FL 32801 FEI Number: 05-0604347 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: INTRASTATE REGISTERED AGENT CORPORATION 200 S ORANGE AVE - STE 2600 ORLANDO, FL 32801 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change ( ) Addition TURNER, CHARLES B Name: Name: TURNER, CHARLES B 200 S ORANGE AVE - STE 2606 200 S ORANGE AVE - STE 2600 Address: Address: City-St-Zip: ORLANDO, FL 32801 City-St-Zip: ORLANDO, FL 32801 Title: DTEV Title: () Delete (X) Change ( ) Addition TURNER, AMY A Name: TURNER, AMY A Name: 200 S ORANGE AVE - STE 2060 200 S ORANGE AVE - STE 2600 Address: Address: ORLANDO, FL 32801 City-St-Zip: City-St-Zip: ORLANDO, FL 32801 Title: Title: ( ) Change (X) Addition () Delete DEV BERGMAN, CAROL E Name: Name: 200 S ORANGE AVE -STE 2600 Address Address: City-St-Zip: City-St-Zip: ORLANDO, FL 32801 Title: () Delete Title: ( ) Change (X) Addition GRUBE, BRUCE Name: Name: Address: Address: 200 S ORANGE AVE - STE 2600 City-St-Zip: City-St-Zip: ORLANDO, FL 32801 Title: Title: ( ) Change (X) Addition ( ) Delete TOMLINSON, DAVE Name: Name: Address: Address: 200 S ORANGE AVE-STE 2600 City-St-Zip: City-St-Zip: ORLANDO, FL 32801

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: CHARLES B TURNER DPS 03/10/2005