2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000007443

JRDR PROPERTIES, INC.



FILED Jan 26, 2007 08:00 AM **Secretary of State**

Principal Place of Business

2279 SEMINOLE ROAD

STE 6 ATLANTIC BEACH, FL 32233 Mailing Address

2279 SEMINOLE ROAD

STE 6

ATLANTIC BEACH, FL 32233



DO NOT WRITE IN THIS SPACE

CR2E034 (11/05) 01242007 No Chg-P

4. FEI Number 20-2789243

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BREITBART, JERRE 2279 SEMINOLE ROAD STE 6 ATLANTIC BEACH, FL 32233

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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, 2007 Fee will be \$550.00

9. Election Campaign Financing

\$5.00 May Be Added to Fees

U00000605118 01/30/07-80023-009 150.00

Trust Fund Contribution. 10. OFFICERS AND DIRECTORS TITLE P.S NAME BREITBART, JERRE STREET ADDRESS 2279 SEMINOLE ROAD, STE 6 CITY-ST-ZIP ATLANTIC BEACH, FL 32233 TITLE WECHSLER, RHONDA NAME 445 S MILL VIEW WAY STREET ADDRESS CITY-ST-ZIP PONTE VEDRA BEACH, FL 32082 TITLE DELUDE, DWIGHT STREET AUDRESS 445 S MILL VIEW WAY CITY-ST-ZIP PONTE VEDR A BEACH, FL 32082 TITLE BREITBART, RICHARD NAME STREET ADDRESS 2279 SEMINOLE ROAD, STE 6 CITY-ST-ZIP ATLANTIC BEACH, FL 32233 TITLE STREET ADDRESS CITY-ST-ZIP

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12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 of 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

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP