

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000019482

Entity Name: JWW CONSULTANT, INC.

**FILED**  
**Jan 18, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1186 HICKORY COVE  
JACKSONVILLE, FL 32221

**New Principal Place of Business:**

**Current Mailing Address:**

1186 HICKORY COVE  
JACKSONVILLE, FL 32221

**New Mailing Address:**

FEI Number: 20-4197733

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WATKINS, JOHN W SR.  
1186 HICKORY COVE  
JACKSONVILLE, FL 32221 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: WATKINS, JOHN W SR  
Address: 1186 HICKORY COVE  
City-St-Zip: JACKSONVILLE, FL 32221

Title: VP  
Name: WATKINS, BARBARA J  
Address: 1186 HICKORY COVE  
City-St-Zip: JACKSONVILLE, FL 32221

I hereby 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 all other like empowered.

SIGNATURE: BARBARA J WATKINS

VP

01/18/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date