2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000100342

1. Entity Name

S & G PROPERTIES OF JACKSONVILLE, INC.



FILED
May 01, 2006 08:00 A
Secretary of State

Principal Place of Business

8750 PERIMETER PARK BLVD JACKSONVILLE, FL 32216-6347

Mailing Address

8750 PERIMETER PARK BLVD JACKSONVILLE, FL 32216-6347



DO NOT WRITE IN THIS SPACE

04182006 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For Not Applied For Not Applicable

5. Certificate of Status Desired Sa.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SIMONIC, NICHOLAS T 8750 PERIMETER PARK BLVD JACKSONVILLE, FL 32216

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				required when reinstating)	DATE	<u> </u>
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Finar Trust Fund Contribution.			• —	\$5.00 May Be Added to Fees		<u> </u>
10,	OFFICERS AND DIRECTORS				·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SIMONIC, NICHOLAS T 9950 CHELSEA LAKE RD JACKSONVILLE, FL 32256					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GREEN, KEVIN S 5 17TH AVE N #502 JACKSONVILLE BCH, FL 32250				U00000552494 05/15/06-80015-006 15	0.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			0°X	DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		·		in '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY+ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. I hereby certify that the information supplied with this filling 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 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.						

NING OFFICER OR DIRECTO