


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 26, 2007 08:00 AM
Secretary of State

DOCUMENT # P99000001345
1. Entity Name
JKMC HOLDINGS, INC.



Principal Place of Business
101 SOUTH MAIN STREET
BROOKSVILLE, FL 34601-3336

Mailing Address
101 SOUTH MAIN STREET
BROOKSVILLE, FL 34601-3336

DO NOT WRITE IN THIS SPACE



03202007 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3553201 Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
MASON, JOSEPH M JR
101 SOUTH MAIN STREET
BROOKSVILLE, FL 34601-3336

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT MASON, JOSEPH M JR 101 SOUTH MAIN STREET BROOKSVILLE, FL 346013336
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS MASON, KATHERINE V 101 SOUTH MAIN STREET BROOKSVILLE, FL 346013336
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MASON MEYER, MARY K 3910 WEST BARCELONA STREET TAMPA, FL 33629
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MASON, CELIA A 101 SOUTH MAIN STREET BROOKSVILLE, FL 346013336
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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04/02/07-80031-009 150.00

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12. I hereby 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 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

SIGNATURE: Joseph M Mason Jr 3/20/07 352/796-0795
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #