2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000046145

1. Entity Name
JKH MANAGEMENT SERVICES, INC.

Principal Place of Business	Mailing Address
3339 AMACA CIRCLE ORLANDO, FL 32837	3339 AMACA CIRCLE ORLANDO, FL 32837

DO NOT WRITE IN THIS SPACE

01282005   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
59-3576961	Not Applicable

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

6. Name and Address of Current Registered Agent

HAGGERTY, JOHN K
3339 AMACA CIRCLE
ORLANDO, FL 32837

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_____

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, 2005 Fee will be $550.00

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

10.   OFFICERS AND DIRECTORS

TITLE	D
NAME	HAGGERTY, JOHN K
STREET ADDRESS	3339 AMACA CIRCLE
CITY-ST-ZIP	ORLANDO, FL 32837

TITLE	
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12. I hereby certify that the information supplied with this filing does not qualify 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 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: _John K Haggerty_   _2/7/05_   _407-240-8191_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #