## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 198801** 

Entity Name: KINGS AND JAX, INC.

FILED Feb 15, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

1590 PALM AVE 1819 KINGS AVENUE

JACKSONVILLE, FL 32207 US JACKSONVILLE, FL 32207 US

Current Mailing Address: New Mailing Address:

P.O. BOX 5994 1819 KINGS AVENUE

JACKSONVILLE, FL 32247 US JACKSONVILLE, FL 32207 US

FEI Number: 59-0810936 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

TALCOTT, BRUCE W VP GOODWIN, RANDALL R P 1590 PALM AVE 1819 KINGS AVENUE

JACKSONVILLE, FL 32207 US JACKSONVILLE, FL 32207 US

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: RANDALL R. GOODWIN 02/15/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 TALCOTT, BRUCE W
 Name:
 GOODWIN, RANDALL R

 Address:
 POST OFFICE BOX 5994
 Address:
 1819 KINGS AVENUE

 City-St-Zip:
 JACKSONVILLE, FL 32247
 City-St-Zip:
 JACKSONVILLE, FL 32207

Title: PD (X) Delete Title: ( ) Change ( ) Addition

 Name:
 HOPKINS, PÀUL A.,
 Name:

 Address:
 9518 HOPKINS RD.
 Address:

 City-St-Zip:
 GLEN ST. MARY, FL 32040
 City-St-Zip:

Title: D (X) Delete Title: ( ) Change ( ) Addition

 Name:
 HOPKINS, PAUL A
 Name:

 Address:
 9518 HOPKINS R..
 Address:

 City-St-Zip:
 GLEN ST. MARY, FL 32040
 City-St-Zip:

Title: D (X) Delete Title: ( ) Change ( ) Addition

 Name:
 TALCOTT, BRUCE W
 Name:

 Address:
 POST OFFICE BOX 5994
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32247
 City-St-Zip:

Title: D (X) Delete Title: ( ) Change ( ) Addition

 Name:
 BRANDON, JOHN
 Name:

 Address:
 22 COM ARES AVE 3B
 Address:

 City-St-Zip:
 ST AUGUSTINE, FL 32080
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: RANDALL R. GOODWIN P 02/15/2007