

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Mar 28, 2008 08:00 AM
Secretary of State

DOCUMENT # 236449

1. Entity Name

JACKSON SITES, INC.



Principal Place of Business

P O BOX 353
SEBRING FL 33871-7353

Mailing Address

P O BOX 353
SEBRING FL 33871-7353



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/07)

4. FEI Number

59-6063376

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BREED, ERNEST M.
2241 LAKEVIEW DR
PO BOX 353
SEBRING FL 33871-0353

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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's signature required when registering)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input type="checkbox"/> Delete
NAME	BREED, ERNEST M.	
STREET ADDRESS	2241 LAKEVIEW DR	
CITY- ST- ZIP	SEBRING FL 33870	
TITLE	V	<input type="checkbox"/> Delete
NAME	BREED, JOHN N.	
STREET ADDRESS	6117 SWEET GUM RD	
CITY- ST- ZIP	BARTOW FL 33830	
TITLE	ST	<input type="checkbox"/> Delete
NAME	HESTON, CHARLOTTE	
STREET ADDRESS	2461 LAKEVIEW DR	
CITY- ST- ZIP	SEBRING FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	BREED, CHARLOTTE N.	
STREET ADDRESS	2241 LAKEVIEW DR	
CITY- ST- ZIP	SEBRING FL 33870	
TITLE	D	<input type="checkbox"/> Delete
NAME	BREED, E. MARK, III	
STREET ADDRESS	310 NEWMAN RD	
CITY- ST- ZIP	SEBRING FL 33876	
TITLE	D	<input type="checkbox"/> Delete
NAME	BREED, DAVID S	
STREET ADDRESS	8030 SOUTH LAGOON DR	
CITY- ST- ZIP	PANAMA CITY FL 32408	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

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04/10/08-80037-001 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Ernest M. Breed (Ernest M. Breed)

3/26/08

863-385-7020

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Day

Day