

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 244963

Entity Name: BILL JACKSON INC

FILED
Jan 03, 2005
Secretary of State

Current Principal Place of Business:

9501 U.S. 19 NORTH
PINELLAS PARK, FL 33782 US

New Principal Place of Business:

Current Mailing Address:

9501 U.S. 19 NORTH
PINELLAS PARK, FL 33782 US

New Mailing Address:

FEI Number: 59-0920287

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACKSON, DOUGLAS C
9501 US 19 N
PINELLAS PARK, FL 33782 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JACKSON, WM B,
Address: 2166 BLOSSOM WAY, SOUTH
City-St-Zip: ST PETERSBURG, FL 33712

Title: V () Delete
Name: JACKSON, WM DARRELL,
Address: 10030 94TH AVE
City-St-Zip: SEMINOLE, FL 33777

Title: V () Delete
Name: JACKSON, DOUGLAS C,
Address: 8001 MACOMA DRIVE, N.E.
City-St-Zip: ST PETERSBURG, FL 33702

Title: S () Delete
Name: JACKSON, HARRIET R,
Address: 2166 BLOSSOM WAY, SOUTH
City-St-Zip: ST PETERSBURG, FL 33712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DOUGLAS C JACKSON

VP

01/03/2005

Electronic Signature of Signing Officer or Director

Date