

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 340909

FILED
Mar 24, 2009
Secretary of State

Entity Name: JACKSONVILLE SOUND & COMMUNICATIONS, INC.

Current Principal Place of Business:

5021 STEPP AVE
JACKSONVILLE, FL 32216 US

New Principal Place of Business:

Current Mailing Address:

5021 STEPP AVE
JACKSONVILLE, FL 32216 US

New Mailing Address:

P. O. BOX 551629
JACKSONVILLE, FL 322551629 US

FEI Number: 59-1229041

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SICK, WILSON W., JR.
8070 LAKECREST DR.
JACKSONVILLE, FL 32256 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: DPC () Delete
Name: BEGLEY, ROBERT E JR
Address: 12338 PLEASURE BAY COURT
City-St-Zip: JACKSONVILLE, FL 32225

Title: TD () Delete
Name: SICK, WILSON W., JR.,
Address: 8070 LAKECREST DR.
City-St-Zip: JACKSONVILLE, FL

Title: D () Delete
Name: SICK, ML
Address: 8070 LAKECREST DR
City-St-Zip: JACKSONVILLE, FL 32258

Title: SV () Delete
Name: STANDIFORD, CAROL B
Address: 121A 13TH AVE S
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: V () Delete
Name: RUDD, MICKEY C
Address: 5709 CLIMBING ROSE WAY
City-St-Zip: SANFORD, FL 32771

Title: V () Delete
Name: DONNELL, RONALD
Address: 1716 WINDOVER PL
City-St-Zip: SAINT AUGUSTINE, FL 32092

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:

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 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: CAROL STANDIFORD

VP

03/24/2009

Electronic Signature of Signing Officer or Director

Date