


2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 11, 2008 8:00 am
Secretary of State

03-11-2008 90017 005 ***150.00

DOCUMENT # 368538
 1. Entity Name
JEFFREY-ALLEN, INC.



Principal Place of Business
**2808 29TH AVENUE, EAST
 BRADENTON FL 34208
 US**

Mailing Address
**P. O. BOX 1520
 BRADENTON FL 34206**



2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

1st MOORE CR2E034 (10/07)

City & State
 Zip Country

4. FEI Number **59-1302702**
 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
**SVERDLOW, JEFFREY C
 2808 29TH AVENUE EAST
 BRADENTON FL 34208**

7. Name and Address of New Registered Agent
 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 _____ DATE _____
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when retreating)

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

TITLE	P	<input type="checkbox"/> Delete
NAME	SVERDLOW, JEFFREY C	
STREET ADDRESS	1521 51ST ST WEST	
CITY-ST-ZIP	BRADENTON FL 34209	
TITLE	S	<input type="checkbox"/> Delete
NAME	SVERDLOW, BENJAMIN R	
STREET ADDRESS	9803 SUNNYOAK DRIVE	
CITY-ST-ZIP	RIVERVIEW FL 33569	
TITLE	D	<input type="checkbox"/> Delete
NAME	SVERDLOW, MARLA M	
STREET ADDRESS	1521 51ST ST WEST	
CITY-ST-ZIP	BRADENTON FL 34209	
TITLE	T	<input type="checkbox"/> Delete
NAME	SVERDLOW, CRAIG A	
STREET ADDRESS	822 MILANO CIR APT 107	
CITY-ST-ZIP	BRANDON FL 33511	
TITLE	VS	<input checked="" type="checkbox"/> Delete
NAME	SVERDLOW, BENJAMIN R	
STREET ADDRESS	111 WILD OAK DR	
CITY-ST-ZIP	BRANDON FL 33511	
TITLE	D	<input type="checkbox"/> Delete
NAME	SVERDLOW, CHRISTINE M	
STREET ADDRESS	1521 51ST STREET W	
CITY-ST-ZIP	BRADENTON FL 34209	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	C/M	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SVERDLOW, JEFFREY C.	
STREET ADDRESS	1521 51ST ST WEST	
CITY-ST-ZIP	BRADENTON, FL 34209	
TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SVERDLOW, BENJAMIN P.	
STREET ADDRESS	111 WILD OAK DRIVE	
CITY-ST-ZIP	BRANDON, FL 33511	
TITLE	D/S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SVERDLOW, MARLA M.	
STREET ADDRESS	1521 51ST ST WEST	
CITY-ST-ZIP	BRADENTON, FL 34209	
TITLE	V/T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SVERDLOW, CRAIG A.	
STREET ADDRESS	822 MILANO CIR APT 107	
CITY-ST-ZIP	BRANDON, FL 33511	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: _____ **941-747-1501**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Case Daytime Phone #
JEFFREY C SVERDLOW CEO