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## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Jan 31, 2008 08:00 A Secretary of State

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1. Entity Name

JENKINS & KAISER, P.A.



US

Principal Place of Business

695 CENTRAL AVENUE

SUITE 202

ST. PETERSBURG, FL 33701

Mailing Address

695 CENTRAL AVENUE

SUITE 202

ST. PETERSBURG, FL 33701

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-1609757

01072008

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

695 CENT SUITE 202	ERNEST P. RAL AVENUE ! RSBURG, FL 33701		DO NOT WRITE IN THIS SPACE				
	named entity submits this statement for the pions of registered agent.	urpose of changing its register	red office or re	gistered agent, or bo	th, in the State of Florida. I am familiar with, and accept		
SIGNATURE_	Signature, typed or printed name of registered agent and little it	applicable (NOTE: Registere	d Agent signature required when reinstaturg) DATE				
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	<ol> <li>Election Campaign Fina Trust Fund Contribution.</li> </ol>		\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	TORS	_				
TITLE NAME	ST KAISER, MARTIN J.						
STREET ADDRESS	695 CENTRAL AVENUE, SUITE 202						
CITY - ST - ZIP	ST. PETERSBURG, FL 33701		_1				
TITLE PD					000000807544 02/07/08-80012-023 150.00		
NAME STREET ADDRESS	JENKINS, ERNEST P 695 CENTRAL AVENUE, SUITE 202			•	02/07/08-80012-023 150.00		
CITY-ST-ZIP	ST. PETERSBURG, FL 33701		1				
TITLE			_				
NAME							
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0111-31-2IF	1		L				

12. Thereby certify that the information supplied with this filling does not quality for the exemptions contained 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 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:

MATURE AND TYPED OR PRINTED IN MAR OF SIGNING OFFICER OR DIRECTOR

1/28/08 227-822-5342 Pare Daytine Phone #