2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 533663

Entity Name: JON M. HALL COMPANY

FILED Feb 07, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1920 BOOTHE CIRCLE SUITE 110 LONGWOOD, FL 32750 US **Current Mailing Address: New Mailing Address:** 1920 BOOTHE CIRCLE SUITE 110 LONGWOOD, FL 32750 US FEI Number: 59-1748765 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HALL, JON M SR 910 NORTH PENINSULA AVE NEW SMYRNA BEACH, FL 32169 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PDC () Delete Title: () Change () Addition Name: HALL, JON M SR Name: 910 NORTH PENINSULA AVE Address: Address: City-St-Zip: NEW SMYRNA BEACH, FL 32169 City-St-Zip: V SD Title: Title: () Delete (X) Change () Addition Name: DYKES, SUSAN S Name: DYKES, SUSAN S 212 E. LAKE VICTORIA CIRCLE 1720 TIMBER HILLS DRIVE Address: Address: DELAND, FL 32724 City-St-Zip: City-St-Zip: DELAND, FL 32724 Title: () Delete Title: () Change () Addition HALL, JAMES C Name: Name: 225 OLD SANFORD OVIEDO ROAD Address: Address: WINTER SPRINGS, FL 32708 City-St-Zip: City-St-Zip: Title: VTD () Delete Title: () Change () Addition HALL, JON M JR Name: Name: Address: 211 ORANGE TERRACE DRIVE Address: City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: Title: () Delete Title: (X) Change () Addition CARSON, KEITH Name: CARSON, KEITH Name: 616 VANDENBERG STREET Address: 1554 RIDGE LAKE CIRCLE Address: City-St-Zip: ALTAMONTE SPRINGS, FL 32701 City-St-Zip: LONGWOOD, FL 32750 Title: () Delete Title: () Change (X) Addition NAVIGATO, DONALD C Name: Name: Address: Address: 10125 NONA STREET City-St-Zip: City-St-Zip: ORLANDO, FL 32825

I hereby certify that the information supplied with this filing does not qualify for the 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: SUSAN DYKES SD 02/07/2007