


2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 617061	
1. Entity Name JA-NO INCORPORATED	

Principal Place of Business 1100 FIELDWOOD BLVD LAKE MARY, FL 32746 US	Mailing Address 1100 FIELDWOOD BLVD LAKE MARY, FL 32746 US
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DO NOT WRITE IN THIS SPACE

FILED
08 JAN 22 AM 11:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01142008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2007983	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

MYERS, MICHAEL B
1100 FIELDWOOD BLVD
LAKE MARY, FL 32746

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

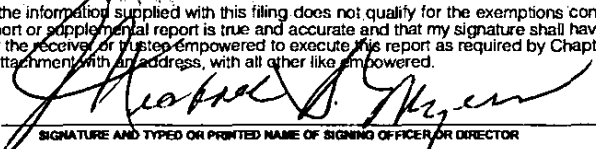
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	01/22/08 800117640598 001 300.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MYERS, MICHAEL B 1100 FIELDWOOD BLVD. LAKE MARY, FL 32746
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MYERS, JACQUELINE M 1100 FIELDWOOD BLVD. LAKE MARY, FL 32746
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MYERS, SEAN M 297 DUBLIN DR LAKE MARY, FL 32746
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify 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:  1-10-08 407-869-3473

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

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