

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 643263

Entity Name: P.W. JACKSON, INC.

FILED
Jan 14, 2008
Secretary of State

Current Principal Place of Business:

240 SOUTH BRIDGE ST.
LABELLE, FL 33935

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 610
LABELLE, FL 33975

New Mailing Address:

FEI Number: 59-1963706

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACKSON, WAYNE
240 S. BRIDGE ST
LABELLE, FL 33935 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: P () Delete
Name: JACKSON, WAYNE,
Address: LIVE OAK LANE
City-St-Zip: LABELLE, FL

Title: VS () Delete
Name: JACKSON, SANDRA,
Address: LIVE OAK LANE
City-St-Zip: LABELLE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JACKSON, WAYNE,
Address: 843 LIVE OAK LANE
City-St-Zip: LABELLE, FL 33935

Title: VS (X) Change () Addition
Name: JACKSON, SANDRA,
Address: 843 LIVE OAK LANE
City-St-Zip: LABELLE, FL 33935

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: WAYNE JACKSON

P

01/14/2008

Electronic Signature of Signing Officer or Director

Date