

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 666736

Entity Name: JA-ROD SERVICES INC.

FILED
Apr 24, 2009
Secretary of State

Current Principal Place of Business:

2933 MYRTLE AVE N
JACKSONVILLE, FL 32209

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2251
JACKSONVILLE, FL 32203

New Mailing Address:

FEI Number: 59-2279429 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACKSON, DARYL R CPA
101 E UNION ST, #400
JACKSONVILLE, FL 32202 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: PD () Delete
Name: NELSON, JANICE
Address: 8789 SAN JOSE BLVD
City-St-Zip: JACKSONVILLE, FL 32217

Title: DS () Delete
Name: NELSON, TONY
Address: 8789 SAN JOSE BLVD
City-St-Zip: JACKSONVILLE, FL 32217

Title: T () Delete
Name: SCOTT, JEFF
Address: 8789 SAN JOSE BLVD
City-St-Zip: JACKSONVILLE, FL 32217

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: TONY NELSON

_____ Electronic Signature of Signing Officer or Director

DS

04/24/2009

_____ Date