


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2006 8:00 am
Secretary of State

03-01-2006 90011 046 ***158.75

DOCUMENT # F00000004812	
1. Entity Name JHA OF MAINE, INC.	

Principal Place of Business 120 EXCHANGE STREET, 3RD FLOOR PORTLAND, ME 04101	Mailing Address 120 EXCHANGE STREET, 3RD FLOOR PORTLAND, ME 04101
---	---

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

02062006 Chg-P CR2E034 (11/05)

4. FEI Number
01-0414531

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent NRAI SERVICES 2731 EXECUTIVE PARK DR SUITE 4 WESTON, FL 33331	
--	--

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	---

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KING, DREW F 120 EXCHANGE STREET, 3RD FLOOR PORTLAND, ME 04101 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V RILEY, KEVIN A 120 EXCHANGE STREET, 3RD FLOOR PORTLAND, ME 04101 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MEINTEL, CHARLES H 120 EXCHANGE STREET, 3RD FLOOR PORTLAND, ME 04101 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DAIGLE, JENNIFER L 120 EXCHANGE STREET 3RD FLOOR PORTLAND, ME 04101 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WOLAK, DANIEL L 695 EAST MAIN STREET STAMFORD, CT 069040300 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WEST, THOMAS M 695 EAST MAIN STREET STAMFORD, CT 069040300 <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Paul A. Tworog 120 Exchange St, 3rd Floor Portland, ME 04101 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Drew F. King* **2/17/06** **207-874-2261**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT
40021679
#F00000004812

Memo



To:	FLORIDA DIVISION OF CORPORATIONS
From:	DEBI LIBBY
Date:	02/17/2006
Subject:	2006 ANNUAL REPORT

ENCLOSED IS THE COMPLETED 2006 ANNUAL REPORT ALONG WITH A CHECK IN THE AMOUNT OF \$158.78. PLEASE FORWARD AN UPDATED CERTIFICATE OF STATUS AS SOON AS POSSIBLE.

THANK YOU.
Debi
DEBI