


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 02, 2008 08:00 AM
Secretary of State

DOCUMENT # F03000000426 1. Entity Name JORDAN OUTDOOR ENTERPRISES, LTD. INC.	
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Principal Place of Business 1390 BOX CIRCLE COLUMBUS, GA 31907	Mailing Address 1390 BOX CIRCLE COLUMBUS, GA 31907
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DO NOT WRITE IN THIS SPACE



03272008 No Chg-P CR2E034 (11/05)

4. FEI Number 58-1552854	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

**DO NOT WRITE
IN THIS SPACE**

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	000000877520 04/14/08-80017-022 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JORDAN, WILLIAM R 1390 BOX CIRCLE COLUMBUS, GA 31907
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HINTON, RODNEY S 1390 BOX CIRCLE COLUMBUS, GA 31907
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST OATES, SAMUEL JR. 1390 BOX CIRCLE COLUMBUS, GA 31907
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS ROSS, WILLIAM D JR. 1390 BOX CIRCLE COLUMBUS, GA 31907
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: *William D Ross* **ASST SECRETARY** **03-31-08** **706-562-7724**

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