

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000000816

Entity Name: JL HOLDINGS I, INC.

FILED
Feb 11, 2008
Secretary of State

Current Principal Place of Business:

C/O JAYLOR SERVICES, LLC
2603 CAMINO RAMON STE 200
SAN RAMON, CA 94583

Current Mailing Address:

C/O JAYLOR SERVICES, LLC
2603 CAMINO RAMON STE 200
SAN RAMON, CA 94583

New Principal Place of Business:

C/O JAYLOR SERVICES, LLC
4695 MACARTHUR COURT STE 1100
NEWPORT BEACH, CA 92660

New Mailing Address:

C/O JAYLOR SERVICES, LLC
4695 MACARTHUR COURT STE 1100
NEWPORT BEACH, CA 92660

FEI Number: 65-1241472

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: PCT () Delete
Name: SCHOENBERG, MATTHEW
Address: 2603 CAMINO RAMON #200
City-St-Zip: SAN RAMON, CA 94583

Title: VPS () Delete
Name: FREED, KENNETH A
Address: 2603 CAMINO RAMON #200
City-St-Zip: SAN RAMON, CA 94583

Title: D () Delete
Name: WILLIAMS, DONALD S
Address: 120 HOWARD STREET, STE. 550
City-St-Zip: SAN FRANCISCO, CA 94105

Title: D () Delete
Name: FELLER, JOSHUA
Address: 309 SEQUOIA TERRACE
City-St-Zip: DANVILLE, CA 94506

Title: D () Delete
Name: CORR, JONATHAN
Address: 4347 QUAIL RUN LANE
City-St-Zip: DANVILLE, CA 94506

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SCHOENBERG, MATTHEW
Address: 4695 MACARTHUR COURT STE 1100
City-St-Zip: NEWPORT BEACH, CA 92660

Title: P (X) Change () Addition
Name: FREED, KENNETH A
Address: 4695 MACARTHUR COURT STE 1100
City-St-Zip: NEWPORT BEACH, CA 92660

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: KENNETHH FREED

P

02/11/2008

Electronic Signature of Signing Officer or Director

Date