## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## **ANNUAL REPORT** FILED DOCUMENT # F06644 1. Entity Name J D H ENTERPRISES, INC. OF POLK COUNTY 2006 APR 20 AM 10: 08 SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 11635 N W 1ST AVENUE 11635 N W 1ST AVENUE GAINESVILLE, FL 32607 GAINESVILLE, FL 32607 No Chg-P 03012006 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2213166 Not Applicable \$8.75 Additional X 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CURTIS, JOHN M DO NOT WRITE 11635 N W 1ST AVENUE GAINESVILLE, FL 32607 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS VST TITLE **CURTIS, GAIL** NAME STREET ADDRESS 11635 NW 1ST AVE GAINESVILLE, FL CITY-ST-ZIP D TITLE **800072299198** 04/27/06--01020--019 \*\*158.75 CURTIS, GAIL NAME STREET ADDRESS 11635 NW 1ST AVE CITY-ST-ZIP GAINESVILLE, FL TITLE NAME CURTIS, JOHN M STREET ADDRESS 11635 N W 1ST AVENUE DO NOT WRITE GAINESVILLE, FL 00000, CITY-ST-7/P IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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 poport 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 of 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.

STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS

SIGNATURE:

<del>\_\_Jo</del>hn M. Curtis \_\_President

04/17/06 352-332-0838

Daytime Phone