

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000000626

FILED
Apr 23, 2009
Secretary of State

Entity Name: JASON-CRAIG ASSOCIATES INC.

Current Principal Place of Business:

14 KINGSMILL ROAD
TORONTO, ONTARIO CANADA, m8x sn8 CA

New Principal Place of Business:

14 KINGSMILL ROAD
TORONTO, ON M8X SN8 CA

Current Mailing Address:

14 KINGSMILL ROAD
TORONTO, ONTARIO CANADA, m8x sn8 CA

New Mailing Address:

14 KINGSMILL ROAD
TORONTO, ON M8X SN8 CA

FEI Number: 98-0042196

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PLATT, DAVID M
1648 PERIWINKLE WAY
SUITE B
SANIBEL, FL 33957 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: PC () Delete
Name: SMITH, PAULA H
Address: 1501 PINETREE CRESCENT, MISSISSAUGA, ONT.
City-St-Zip: CANADA L5G 259,

Title: DV () Delete
Name: SMITH, CRAIG G
Address: 14 KINGSMILL ROAD
City-St-Zip: TORONTO ONTARIO, CA M8X-28

Title: SD () Delete
Name: SMITH, JASON D
Address: 208 FLANDERS RD
City-St-Zip: TECUMSEH ONT, CA N8N-33

Title: DV () Delete
Name: SMITH, CHRISTINE P
Address: 500 RICHMOND ST W PH 27
City-St-Zip: TORONTO ONT., CA MS-VI2

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SMITH, PAULA H
Address: 1501 PINETREE CRESCENT
City-St-Zip: MISSISSAUGA, ON CA

Title: DV (X) Change () Addition
Name: SMITH, CRAIG G
Address: 14 KINGSMILL ROAD
City-St-Zip: TORONTO, ON M8X-28 CA

Title: SD (X) Change () Addition
Name: SMITH, JASON D
Address: 208 FLANDERS RD
City-St-Zip: TECUMSEH, ON N8N-33 CA

Title: DV (X) Change () Addition
Name: SMITH, CHRISTINE P
Address: 500 RICHMOND ST W PH 27
City-St-Zip: TORONTO, ON MS-VI2 CA

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: PAUL H. SMITH

DP

04/23/2009

Electronic Signature of Signing Officer or Director

Date