

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000005189

Entity Name: J.S.P.A., INC.

FILED  
Feb 02, 2008  
Secretary of State

**Current Principal Place of Business:**

4600 ALBRITTON RD  
ST CLOUD, FL 34772 US

**New Principal Place of Business:**

**Current Mailing Address:**

2380 LANE WOODS DRIVE  
COLUMBUS, OH 43221

**New Mailing Address:**

2041 RIVERSIDE DRIVE  
SUITE 201 - CROWN PT  
COLUMBUS, OH 43221

FEI Number: 31-1564628

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SLAVEN, JOEL  
4600 ALBRITTON RD  
ST CLOUD, FL 34772 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: P ( ) Delete  
Name: SLAVEN, JOEL  
Address: 4600 ALBRITTON RD  
City-St-Zip: ST CLOUD, FL 34772

Title: V ( ) Delete  
Name: BARKAN, NEAL  
Address: 150 E. STATE ST  
City-St-Zip: COLUMBUS, OH 43215

Title: T ( ) Delete  
Name: GREENBERG, MARVIN S  
Address: 2717 BURNABY DR  
City-St-Zip: COLUMBUS, OH 43209

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: MICHAEL BERNSTEIN

CPA

02/02/2008

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date