## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G30471

FILED Apr 14, 2004 Secretary of State

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Entity Nar	ne: JLN COM	MPANY, INC.			
Current P	rincipal Place	e of Business:	New Principal Place	of Business:	
	) ST. AUGUS VILLE, FL 32				
Current M	ailing Addre	ss:	New Mailing Address	New Mailing Address:	
	ST. AUGUS VILLE, FL 32				
FEI Number:	59-2289751	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
NICHOLSON, JAMES L., JR. 10609 OLD ST. AUGUSTINE ROAD JACKSONVILLE, FL 32257					
The above in the State		submits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			gent	Date	
Election Can	npaign Financir	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DPT ( NICHOLSON, 10609 OLD ST JACKSONVILL	. AUGUSTINE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DS ( NICHOLSON, 10609 OLD ST JACKSONVILL	. AUGÚSTINE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JAMES NICHOLSON DPT 04/14/2004