

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G59372

FILED
Jan 14, 2008
Secretary of State

Entity Name: JOHN STEWART ENTERPRISES, INC.

Current Principal Place of Business:

502 N. HOGAN STREET
JACKSONVILLE, FL 32202

New Principal Place of Business:

510 N. HOGAN STREET
JACKSONVILLE, FL 32202

Current Mailing Address:

502 N. HOGAN STREET
JACKSONVILLE, FL 32202

New Mailing Address:

510 N. HOGAN STREET
JACKSONVILLE, FL 32202

FEI Number: 59-2323216

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEWART, VAN JANET
506 CLIFFTON BLUFF LANE
JACKSONVILLE, FL 32211 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: PDST () Delete
Name: STEWART, VAN JANET,
Address: 506 CLIFFTON BLUFF LANE
City-St-Zip: JACKSONVILLE, FL 32211

Title: VP () Delete
Name: STEWART, JOHN
Address: 506 CLIFTON BLUFF LANE
City-St-Zip: JACKSONVILLE, FL 32211

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: VAN JANET STEWART

PRES

01/14/2008

Electronic Signature of Signing Officer or Director

Date