2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H58632

JACKSONVILLE, FL -+

City-St-Zip:

Entity Name: J. & B. WOOLARD, INCORPORATED

FILED May 18, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
1525 HALS	A A. WOOLAR SEMA ROAD N VILLE, FL 322	IORTH			
Current Mailing Address:			New Mailing Address:		
1525 HALS	A A. WOOLAR SEMA ROAD N VILLE, FL 322	IORTH			
FEI Number:	: 59-2527755	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:					
1525 HALS	D, BRENDA A. SEMA ROAD N VILLE, FL 322				
	named entity s e of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATUR	RE:				
	Electron	ic Signature of Registered Ag	ent	Date	
Election Car	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	V () WOOLARD, BR 1525 HALSEMA JACKSONVILLE	RDN	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	PST () WOOLARD, BR 1525 HALSEMA		Title: Name: Address:	() Change () Addition	

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: BRENDA WOOLARD PVT 05/18/2009