

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 02, 2008 8:00 am**  
**Secretary of State**

05-02-2008 90110 018 \*\*\*150.00

|  |  |  |  |  |  |
|--|--|--|--|--|--|
| <b>DOCUMENT # H60188</b><br>1. Entity Name<br><b>JACARANDA COMMERCIAL CORPORATION</b>  |  |  |  |  |  |
| Principal Place of Business<br><b>333 S TAMiami TrL.<br/>STE. 101<br/>VENICE, FL 34285 US</b>  |  |  | Mailing Address<br><b>333 S TAMiami TrL.<br/>STE. 101<br/>VENICE, FL 34285 US</b>  |  |  |
| 2. Principal Place of Business - No P.O. Box #<br><b>333 South Tamiami Trail</b>   |  | 3. Mailing Address<br><b>333 South Tamiami Trail</b>                             |  |  |  |
| Suite, Apt. #, etc.<br><b>Suite 203</b>  |  | Suite, Apt. #, etc.<br><b>Suite 203</b>  |  |  |  |
| City & State<br><b>Venice, FL</b>  |  | City & State<br><b>Venice, FL</b>  |  |  |  |
| Zip<br><b>34285</b>  | Country<br><b>US</b>   | Zip<br><b>34285</b>  | Country<br><b>US</b>   |  |  |
| 4. FEI Number<br><b>59-2536874</b>   |  |  |  | Applied For<br><input type="checkbox"/> Not Applicable |  |
| 5. Certificate of Status Desired <input type="checkbox"/>  |  |  |  | <b>\$8.75</b> Additional Fee Required                  |  |
| 6. Name and Address of Current Registered Agent<br><br><b>MILLER, MICHAEL W.<br/>333 S TAMiami TRAIL<br/>STE 101<br/>VENICE, FL 34285</b>  |  |  | 7. Name and Address of New Registered Agent<br><br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br><b>333 South Tamiami Trail, Suite 203</b><br>City <b>Venice</b> <b>FL</b> Zip Code <b>34285</b> |  |  |
| 8. 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. I am familiar with, and accept the obligations of registered agent.<br><br>SIGNATURE:  DATE: <b>5/1/08</b><br><small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>   |  |  |  |  |  |
| <b>FILE NOW!!! FEE IS \$150.00<br/>After May 1, 2008 Fee will be \$550.00</b>  |  | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> |  | <b>\$5.00</b> May Be Added to Fees                     |  |
| 10. OFFICERS AND DIRECTORS   |  |  | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | PD<br>MILLER, MICHAEL W.<br>333 S TAMiami TrL, STE. 101<br>VENICE, FL 34285  | <input type="checkbox"/> Delete  |  |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | VSD<br>PARRISH, JAYNE E..<br>333 S TAMiami TrL, STE. 101<br>VENICE, FL 34285 | <input type="checkbox"/> Delete  |  |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | VPD<br>MILLER, T D<br>333 S TAMiami TrL, STE. 101<br>VENICE, FL 34285        | <input type="checkbox"/> Delete  |  |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | <div style="border: 1px solid black; height: 40px; width: 100%;"></div>      |  |  |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | <div style="border: 1px solid black; height: 40px; width: 100%;"></div>      |  |  |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | <div style="border: 1px solid black; height: 40px; width: 100%;"></div>      |  |  |  |  |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. |  |  |  |  |  |
| SIGNATURE:  DATE: <b>5/1/08</b> DAYTIME PHONE #: <b>941 441 1651</b><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>  |  |  |  |  |  |