

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J20199

Entity Name: JEFTON ENTERPRISES, INC.

FILED  
Apr 11, 2005  
Secretary of State

## Current Principal Place of Business:

P.O. BOX 1251  
KEY LARGO, FL 33037

## New Principal Place of Business:

P.O. BOX 1227  
KEY LARGO, FL 33037

## Current Mailing Address:

P.O. BOX 1227  
KEY LARGO, FL 33037 US

## New Mailing Address:

FEI Number: 59-2686352      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SAMPLE, MARY ELLEN  
119 MARINA AVENUE  
KEY LARGO, FL 33037 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: PD ( ) Delete  
Name: SAMPLE, MARY ELLEN,  
Address: 119 MARINA AVE  
City-St-Zip: KEY LARGO, FL

Title: VPSD ( ) Delete  
Name: SAMPLE, JAMES A., II, I  
Address: 119 MARINA AVR  
City-St-Zip: KEY LARGO, FL

## 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 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: MARY ELLEN SAMPLE

PRES

04/11/2005

Electronic Signature of Signing Officer or Director

Date