## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## FILED May 04, 2005 8:00 am Secretary of State

4/28/05 352-795 6986 Dato Daytone Phic

DOCU 1. Entity Nam JIM EYS	ne	# J2U8 ALTY, INC							05-04-2	005 901	116 032 ***	150°	.00	
Principal Place of Business % JAMES P. EYSTER 7655 W. GULF TO LAKE HWY. #14 CRYSTAL RIVER, FL 34429 US				Mailing Address  % JAMES P. EYSTER 7655 W. GULF TO LAKE HWY. #14 CRYSTAL RIVER, FL 34429 US			1   <b>181</b>     <b>1</b>							
2. Principal P	<u>W. C</u>	iness Sulf tolu	ike Hwy	3. Mailing Address 7449 W. Gulf to Lake Hwy			7							
Suite, Apt. Suite City & Stat	<u>*5</u>			Suite, Apt. #, etc. Suite #5 City & State				04272005 4. FEI Num		(	CR2E034 (10/	,	lied For	
Crystal		F1 2	4429	Cristal River,	Fl	3442	9		47854		-	+	Applicable	
Zip 3442	a	Country	USA	Zip 34429	Coun	itry	USA		te of Status Des		□ \$8.75 Fee Red			
6. Name and Address of Current Registered Agent							~	7. Name ar	nd Address of !	New Regis	stered Agent			
EYSTER, JAMES P 7655 W. GULF TO LAKE HWY. SUITE 14 . CRYSTAL RIVER, FL 34429							Name Eyster, Ames P. Street Address (P.O. Box Number is Not Acceptable) to L					<u> </u>	Suite 5	
						City Crystal River				FL Zip Code				
8. The above	named enti	ity submits this	statement for	the purpose of changing i	ts register	ed office or	register	ed agent, or b	ooth, in the State	of Florida	ı. I am familiar v	with, a	nd accept	
SIGNATURE.														
FILE NOWIII FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Added to Fees														
10. TITLE	DP	- OFI	FICERS AND D	Delete	11.	:	70	ADDITIONS	S/CHANGES TO	O OFFICE	RS AND DIRECT		IN 11	
NAME STREET ADDRESS CITY-ST-ZIP	7655 W.	, JAMES P GULF TO LA L RIVER, FL		N.			EYSTO 7440		P If to Lake Ur, Fl 3		Suide 5	•	C ACCURON	
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12. I hereby certify that the information supplied with this filing does not qualify 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 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.														