

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J24840

Entity Name: J AND M EDMONDS, INC.

FILED  
Jan 13, 2006  
Secretary of State

## Current Principal Place of Business:

8983 OKEECHOBEE BLVD  
SUITE 200  
W. PALM BEACH, FL 33411 US

## New Principal Place of Business:

## Current Mailing Address:

8983 OKEECHOBEE BLVD  
SUITE 200  
W. PALM BEACH, FL 33411 US

## New Mailing Address:

FEI Number: 59-2697993

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

EDMONDS, WILLIAM D  
6109 INDIAN FOREST CIRCLE  
LAKE WORTH, FL 33463 US

## Name and Address of New Registered Agent:

EDMONDS, WILLIAM D  
8688 GRASSY ISLE TRAIL  
LAKE WORTH, FL 33467 US

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:

01/13/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: EDMONDS, WM D  
Address: 6109 INDIAN FOREST CIRCLE  
City-St-Zip: LAKE WORTH, FL 33463 US

Title: D ( ) Delete  
Name: LIBERATA, EDMONDS  
Address: 6109 INDIAN FOREST CIRCLE  
City-St-Zip: LAKE WORTH, FL 33463 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: EDMONDS, WM D  
Address: 8688 GRASSY ISLE TRAIL  
City-St-Zip: LAKE WORTH, FL 33467 US

Title: D (X) Change ( ) Addition  
Name: LIBERATA, EDMONDS  
Address: 8688 GRASSY ISLE TRAIL  
City-St-Zip: LAKE WORTH, FL 33467 US

I hereby certify that the information supplied with this filing does not qualify for the 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: LIBERATA EDMONDS

D

01/13/2006

Electronic Signature of Signing Officer or Director

Date