2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCLIMENT# J57544

Address:

City-St-Zip:

4610 SHELBY AVE

JACKSONVILLE, FL 32210

FILED Apr 26, 2004

DOCOIVI	LIVI# UUI	77		Secretary of State	
Entity Name: THE KEN JACOBS COMPANY, INC.					
Current Principal Place of Business:			New Principal Place o	f Business:	
4610 SHELBY AVENUE					
JACKSON\	/ILLE, FL 3221	0			
Current Mailing Address:			New Mailing Address:	:	
4610 SHEL	BY AVENUE				
	/ILLE, FL 3221	0			
	50.0700744				
FEI Number:	59-2/69/41	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:	
	(ENNETH J		JACOBS, KENNETH J		
3903 ST JOHN'S AVE JACKSONVILLE, FL 32205 US			4610 SHELBY AVENUE	4610 SHELBY AVENUE JACKSONVILLE, FL 32210 US	
0, 10, 10, 01, 11			07.101.1001.17.1212, 7.2.01		
		ubmits this statement for the pu	rpose of changing its registered	office or registered agent, or both,	
in the State					
SIGNATURE:				04/26/2004	
Electronic Signature of Registered Agent Date					
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title:		Delete	•) Change ()Addition	
Name: Address:	JACOBS, KENNE 4610 SHELBY A	· · · · · · · · · · · · · · · · · · ·	Name: Address:		
City-St-Zip:	JACKSONVILLE,		City-St-Zip:		
Title:	V ()I	Delete	Title: () Change () Addition	
Name:	MILLER, RAYMO	PND,	Name:		
Address:	8655 BECK CT JACKSONVILLE,	EL 22220	Address:		
City-St-Zip:		TL 32220	City-St-Zip:		
Title: Name:	VP (X) JACOBS, CHRIS	Delete TOPHER B	Title: (Name:) Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: KENNETH J JACOBS **DPST** 04/26/2004