2008 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 24, 2008 08:00 AM Secretary of State **DOCUMENT # J79628** 1. Entity Name JTB. INC. Principal Place of Business Mailing Address 1031 W. MORSE BLVD., #300 1031 W. MORSE BLVD., #300 WINTER PARK, FL 32789 WINTER PARK, FL 32789 CR2E034 (11/05) 03202008 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2818215 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MOULTON, LESLEY DO NOT WRITE 1031 W. MORSE BLVD., #300 WINTER PARK, FL 32789 IN THIS SPACE 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOWILL FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. MIF NAME BARNES, JAMES T. JR. STREET ADDRESS 1031 W. MORSE BLVD. #300 U00000919532 05/14/08-80007-021 150.00 CITY-ST-ZIP WINTER PARK, FL STD TITLE MOULTON, LESLEY NAME STREET ADDRESS 1031 W. MORSE BLVD. #300 WINTER PARK, FL CITY-ST-ZIP IIILE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP 0% TITLE

12. I hereby certify that the information supplied with this filling 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 the rike empowered.

**SIGNATURE:** 

STREET ADDRESS

BIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/08

407-628-8700

Daytime Phone #

FILED