


2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # K54728 1. Entity Name M & JB INVESTMENT COMPANY	
--	---

Principal Place of Business 3310 U.S. ATERNATE 19 DUNEDIN, FL 34698	Mailing Address 3310 U.S. ATERNATE 19 DUNEDIN, FL 34698
---	---

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**BRYCE, JEAN Y
3148 AUTUMN DRIVE
PALM HARBOR, FL 34683**

**DO NOT WRITE
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$550.00 Due by September 12, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000958191 08/22/08-80001-013 550.00
--	--	---

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P BRYCE, JEAN Y 3148 AUTUMN DR. PALM HARBOR, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST BRYCE, JEAN Y. 3148 AUTUMN DR PALM HARBOR, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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 other like empowered.

SIGNATURE: *Jean Y. Bryce, President* **8/19/08** **727/786-4567**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Jean Y. Bryce, President