

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K84104

FILED  
Jan 06, 2009  
Secretary of State

Entity Name: JBMS ENTERPRISES, INC.

**Current Principal Place of Business:**

% JAMES BLIVEN  
1630-A RIDGEWOOD AVE  
HOLLY HILL, FL 32117

**New Principal Place of Business:**

**Current Mailing Address:**

% JAMES BLIVEN  
1630-A RIDGEWOOD AVE  
HOLLY HILL, FL 32117

**New Mailing Address:**

FEI Number: 59-2972614      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BLIVEN, JAMES  
1630-A RIDGEWOOD AVE  
HOLLY HILL, FL 32117      US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: BLIVEN, JAMES E,  
Address: 2066 S HILL COX  
City-St-Zip: DAYTONA BEACH, FL 32118

Title: VP      ( ) Delete  
Name: STASKO, MICHAEL J.,  
Address: 15 HUMMINGBIRD LN  
City-St-Zip: ORMOND BCH, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P      (X) Change ( ) Addition  
Name: BLIVEN, JAMES E,  
Address: 231 RIVERSIDE DRIVE, #904 BLDG 1  
City-St-Zip: HOLLY HILL, FL 32117

Title: VP      (X) Change ( ) Addition  
Name: STASKO, MICHAEL J.,  
Address: 15 HUMMINGBIRD LN  
City-St-Zip: ORMOND BCH, FL 32174

I hereby certify that the information supplied with this filing does not qualify 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: JAMES E BLIVEN

P

01/06/2009

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date