

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 26, 2007 08:00 A
Secretary of State

DOCUMENT # M43806

1. Entity Name
JANUS & HILL CORPORATION



Principal Place of Business

**11320 FORTUNE CIRCLE
STE G-19
WELLINGTON, FL 33414 US**

Mailing Address

**11320 FORTUNE CIRCLE
STE G-19
WELLINGTON, FL 33414 US**

DO NOT WRITE IN THIS SPACE



03202007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2755028	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**HILL, MONICA B
3355 SANTA BARBARA DRIVE
WELLINGTON, FL 33414**

**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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when restate)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	HILL, MONICA B.
STREET ADDRESS	3355 SANTA BARBARA DRIVE
CITY-ST-ZIP	WELLINGTON, FL 33414

TITLE	SD
NAME	HILL, GREGGORY A
STREET ADDRESS	3355 SANTA BARBARA DRIVE
CITY-ST-ZIP	WELLINGTON, FL 33414

TITLE	VD
NAME	HILL, GREGGORY A.
STREET ADDRESS	3355 SANTA BARBARA DRIVE
CITY-ST-ZIP	WELLINGTON, FL 33414

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/05/07-80020-022 158.75

**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: Monica S Hill
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/22/07

Date

Daytime Phone #