2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007866

City-St-Zip:

Name:

Address:

City-St-Zip:

LEHIGH ACRES, FL 33971

PRESCOTT, VENITA

210 SOUTH LAKE DRIVE

LEHIGH ACRES, FL 33936

() Delete

Entity Name: THE J CONNECTION, INC.

FILED Mar 17, 2006 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
3106 6 ST. WEST LEHIGH ACRES, FL 33971				3108- 6 STREET WEST LEHIGH ACRES, FL 33971			
Current Mailing Address:				New Mailing Address:			
	_				- 3		
P.O. BOX 74 LEHIGH ACRES, FL 33970							
FEI Number:	65-0902568	FEI Number Applied For ()	FEI Num	ber Not Appli	cable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
THOMAS-JOSEPH, JOEANNE M				THOMAS-JOSEPH, JOEANNE M			
3108-6 ST.	WEST CRES, FL 33971 US			3108-6 STREET WEST LEHIGH ACRES, FL 33971 US			
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
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: JOEANNE M. THOMAS-JOSEPH Electronic Signature of Registered Agent				03/17/2006			
				Date			
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address:	. ,	Delete PH, JOEANNE M		Title: Name: Address:		() Change () Addition	
City-St-Zip:	LEHIGH ACRES	, FL 33970		City-St-Zip:			
Title: Name:	JOSEPH, SR., J	Delete ONATHAN D		Title: Name:		() Change () Addition	
Address: City-St-Zip:	P.O. BOX 74 LEHIGH ACRES	, FL 33970		Address: City-St-Zip:			
Title: Name: Address: City-St-Zip:	VP/ () SALOME, JULIE 8401 TRILLIUM GLENDALE, MC	TRAIL		Title: Name: Address: City-St-Zip:	VP/ SALOME, JU 8401 TRILLI GLENDALE,		
Title: Name: Address: City-St-Zip:	VP/D () FRANCIS, SHIR 108 AIRVIEW LEHIGH ACRES			Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address:	D () THOMAS, DION 3106-6TH STRE	Delete ET, WEST		Title: Name: Address:	V JENELLE, J 8401 TRILL		

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

GLENDALE, MD 20789

ROMANA, FRASER

TRINIDAD,, WI 99999

(X) Change () Addition

#2 SAVANNAH DRIVE, GREEN HILL VILLAGE

SIGNATURE: JOEANNE M . THOMAS-JOSPEH CEO 03/17/2006