2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006755

Entity Name: JACOB'S LADDER, INC.

FILED Feb 13, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 810292 5086 GOLFVIEW COURT BOCA RATON, FL 33481

SUITE 1612

DELRAY BEACH, FL 33484

Current Mailing Address: New Mailing Address:

P.O. BOX 810292 BOCA RATON, FL 33481

FEI Number: 75-3009093 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

CARTER, JAMES H PASTOR CARTER, JAMES H 5086 GOLFVIEW COURT 5086 GOLFVIEW COURT **SUITE 1612** SUITE 1612 DELRAY BEACH, FL 33484 US DELRAY BEACH, FL 33484 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: JAMES H. CARTER 02/13/2007

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PSD (X) Change () Addition () Delete CARTER, JILL M PASTOR Name: CARTER, JILL M Name: 5086 GOLFVIEW COURT #1612 Address: 5086 GOLFVIEW COURT #1612 Address:

City-St-Zip: DELRAY BEACH, FL 33484 City-St-Zip: DELRAY BEACH, FL 33484

(X) Change () Addition Title: () Delete Title: CARTER, JAMES H PASTOR Name: CARTER, JAMES H Name:

Address: 5086 GOLFVIEW COURT #1612 Address: 5086 GOLFVIEW COURT #1612 City-St-Zip: DELRAY BEACH, FL 33484 City-St-Zip: DELRAY BEACH, FL 33484

Title: () Delete Title: (X) Change () Addition SHANNON, RAY PASTOR Name: SHANNON, RAY Name:

16 TIMBER COURT 16 TIMBER COURT Address: Address: City-St-Zip: GLENDORA, NJ 08029 City-St-Zip: GLENDORA, NJ 08029

Title: () Delete Title: (X) Change () Addition

Name: SHANNON, CAROL PASTOR Name: SHANNON, CAROL Address: 16 TIMBER COURT Address: 16 TIMBER COURT City-St-Zip: GLENDORA, NJ 08029 City-St-Zip: GLENDORA, NJ 08029

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.

SIGNATURE: JILL M. CARTER **PSD** 02/13/2007