

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002842

FILED
Jan 13, 2008
Secretary of State

Entity Name: JSR TRAINING, INC

Current Principal Place of Business:

4130 - 5TH AVENUE NORTH
ST PETERSBURG, FL 33707

New Principal Place of Business:

Current Mailing Address:

PO BOX 530652
ST. PETERSBURG, FL 33747

New Mailing Address:

FEI Number: 01-0670226

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REED, JERI S
5213 - 11TH AVENUE SOUTH
GULFPORT, FL 33707 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: REED, JERI S MS.
Address: 5213 - 11TH AVENUE SOUTH
City-St-Zip: GULFPORT, FL 33707

Title: V () Delete
Name: REED, RALPH L
Address: 12146 TALLWOOD ROAD
City-St-Zip: SPRINGHILL, FL 34608

Title: V () Delete
Name: REED, MICHAEL T
Address: 12360 HANLEY DRIVE
City-St-Zip: SPRINGHILL, FL 34608

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JERI S REED

P

01/13/2008

Electronic Signature of Signing Officer or Director

Date