2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000028815

Entity Name: JCJM MANAGEMENT, INC.

PORT ORANGE, FL 32128

City-St-Zip:

FILED Jan 04, 2006 Secretary of State

Littly Nai	ille. JOJIVI I	MANAGEMENT, INC.					
Current P	rincipal Pla	ce of Business:	New Princ	New Principal Place of Business:			
1790 S NC DAYTONA	OVA RD A BEACH, FL	. 32119					
Current M	lailing Addı	ess:	New Maili	New Mailing Address:			
	OSTA VILLA ANGE, FL 3						
FEI Number:	: 59-3635596	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired	()	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:			
SCHNEBLY, JOHN JR 125 N. RIDGEWOOD AVENUE DAYTONA BEACH, FL 32114 US			1275 LA C	SCHNEBLY, JOHN JR 1275 LA COSTA VILLAGE BLVD. PORT ORANGE, FL 32129 US			
	named entit e of Florida.	y submits this statement for the	purpose of changing	its registered	office or registered agent, o	r both,	
SIGNATUR	RE:			01/04/2006			
		onic Signature of Registered Ag	ent		Date		
Election Car	mpaign Financ	ing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title:	Р	() Delete	Title:	Р (X) Change ()Addition		
Name:	SCHNEBLY,		Name:	SCHNEBLY, J			
Address:		STA VILLAGE BLVD.	Address:		TA VILLAGE BLVD.		
City-St-Zip:	PORT ORAN	GE, FL 32129	City-St-Zip:	PORT ORANG	6E, FL 32129		
Title:	V	() Delete	Title:	V	X) Change ()Addition		
Name:	SCHNEBLY,		Name:	SCHNEBLY, N			
Address:	6026 SAWG	RASS POINT DRIVE	Address:	6026 SAWGR	ASS POINT DRIVE		
City-St-Zip:	PORT ORAN	GE, FL 32128	City-St-Zip:	PORT ORANG	SE, FL 32128		
Title:	S	(X) Delete	Title:	() Change () Addition		
Name:	SCHNEBLY,	* *	Name:	`	,		
Address:	,	RASS POINT DRIVE	Address:				
City-St-Zip:	PORT ORAN	GE, FL 32128	City-St-Zip:				
Title:	Т	(X) Delete	Title:	() Change () Addition		
Name:	SCHNEBLY,		Name:	`	,		
Address:		RASS POINT DRIVE	Address:				

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

City-St-Zip:

SIGNATURE: JOHN M SCHNEBLY JR P 01/04/2006