


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2008 8:00 am
Secretary of State

01-16-2008 90046 006 ***150.00

DOCUMENT # P0000037025
 1. Entity Name
 JIM ANDERSON REALTY COMPANY



Principal Place of Business: 6000 MARINA DRIVE, SUITE 105, HOLMES BEACH, FL 34217
 Mailing Address: 6000 MARINA DRIVE, SUITE 105, HOLMES BEACH, FL 34217

DO NOT WRITE IN THIS SPACE

40004000



01102008 No Chg-P CR2E034 (11/05)

4. FEI Number: 65-1015112 Applied For: Not Applicable
 5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 ANDERSON, JIM
 6000 MARINA DRIVE
 SUITE 105
 HOLMES BEACH, FL 34217

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	ANDERSON, JIM
STREET ADDRESS	6000 MARINA DRIVE 619 DUNDEE LANE
CITY-ST-ZIP	HOLMES BEACH, FL 34217
TITLE	D
NAME	ANDERSON, ELIZABETH
STREET ADDRESS	6000 MARINA DRIVE 619 DUNDEE LANE
CITY-ST-ZIP	HOLMES BEACH, FL 34217
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 partner or trustee empowered to execute this report as required by Chapter 207, 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: Jim Anderson JIM ANDERSON 01/16/08 941 778-4847
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #