2007 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Apr 24, 2007 8:00 am Secretary of State DOCUMENT # P00000094889 04-09-2007 90072 042 ***150.00 JOHN'S CASH CONNECTION, INC. Mailing Address Principal Place of Business 214 DOMARIS AVE. 214 DOMARIS AVE. LAKE WALES, FL 33853 LAKE WALES, FL 33853 No Chg-P CR2E034 (11/05) 03292007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3687572 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Age STEEDLEY, JOHN DO NOT WRITE 214 DOMARIS AVE. LAKE WALES, FL 33853 IN THIS SPACE 6. 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. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. OFFICERS AND DIRECTORS 10. TILE NAME STEEDLEY, JOHN STREET ADDRESS 214 DOMARIS AVE. LAKE WALES, FL 33853 CTY-51-20 DTE HALF STREET ADDRESS CITY-ST-7P TITLE HALE STREET ADDRESS DO NOT WRITE CITY-ST-ZP IN THIS SPACE TIRLE NAME STREET ADDRESS CTY-57-ZIP TITLE NAME STREET ADDRESS DTY-57-29 NULE STREET ADDRESS CITY-ST-ZP 12. I hereby certify that the information supplied with this filling 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 receiver or trustee empowered to execute this report as required by Chapter 807, 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.

OFFICER OF OFFICE

42007

FILED