

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000109980

FILED
Feb 23, 2007
Secretary of State

Entity Name: JACKSON ENTERPRISES OF OSCEOLA COUNTY, INC.

Current Principal Place of Business:

1919 N MAIN STREET
KISSIMMEE, FL 34744

New Principal Place of Business:

Current Mailing Address:

1919 N MAIN STREET
KISSIMMEE, FL 34744

New Mailing Address:

FEI Number: 59-3688700

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACKSON, KEN
1919 N MAIN STREET
KISSIMMEE, FL 34744 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: JACKSON, KEN
Address: 140 SYLVANA CT.
City-St-Zip: AUBURNDALE, FL 33823

Title: DVS () Delete
Name: JACKSON, TARA
Address: 140 SYLVANA CT
City-St-Zip: AUBURNDALE, FL 33823

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: JACKSON, KEN
Address: 480 AMETHYST AVE
City-St-Zip: AUBURNDALE, FL 33823

Title: DVS (X) Change () Addition
Name: JACKSON, TARA
Address: 480 AMETHYST AVE
City-St-Zip: AUBURNDALE, FL 33823

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.

SIGNATURE: KEN JACKSON

PRES

02/23/2007

Electronic Signature of Signing Officer or Director

Date