

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000000493

FILED
Apr 25, 2006
Secretary of State

Entity Name: JACKSONVILLE ACCOUNTING & TAX SERVICES, INC.

Current Principal Place of Business:

1258 ST JOHNS BLUFF RD N
JACKSONVILLE, FL 32225

New Principal Place of Business:

1309 ST JOHNS BLUFF RD N
SUITE 104
JACKSONVILLE, FL 32225

Current Mailing Address:

1258 ST JOHNS BLUFF RD N
JACKSONVILLE, FL 32225

New Mailing Address:

PO BOX 350088
JACKSONVILLE, FL 32235

FEI Number: 59-3690191

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOILANEN, THOMAS E
1258 ST JOHNS BLUFF RD N
JACKSONVILLE, FL 32225 US

Name and Address of New Registered Agent:

MOILANEN, THOMAS E
1309 ST JOHNS BLUFF RD N
SUITE 104
JACKSONVILLE, FL 32225 US

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: THOMAS MOILANEN

04/25/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: MOILANEN, THOMAS
Address: 10227 CLASSIC OAKS ROAD
City-St-Zip: JACKSONVILLE, FL 32225

Title: DVS () Delete
Name: MOILANEN, VIVIAN
Address: 10227 CLASSIC OAKS ROAD NORTH
City-St-Zip: JACKSONVILLE, FL 32225

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: MOILANEN, THOMAS
Address: 10227 CLASSIC OAK ROAD N
City-St-Zip: JACKSONVILLE, FL 32225

Title: DVS (X) Change () Addition
Name: MOILANEN, VIVIAN
Address: 10227 CLASSIC OAK ROAD NORTH
City-St-Zip: JACKSONVILLE, FL 32225

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: THOMAS MOILANEN

PRES

04/25/2006

Electronic Signature of Signing Officer or Director

Date