

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000002179

Entity Name: JWA CORPORATION OF TAMPA

FILED  
Apr 11, 2005  
Secretary of State

## Current Principal Place of Business:

14904 PERRIWINLE CT.  
TAMPA, FL 33625

## New Principal Place of Business:

15210 AMBERLY DR  
#1617  
TAMPA, FL 33647

## Current Mailing Address:

14904 PERRIWINLE CT.  
TAMPA, FL 33625

## New Mailing Address:

15210 AMBERLY DR.  
#1617  
TAMPA, FL 33647

FEI Number: 59-3692060

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ANDERSON, JOSHUA  
14904 PERRIWINLE CT.  
TAMPA, FL 33625 US

## Name and Address of New Registered Agent:

ANDERSON, JOSHUA  
15210 AMBERLY DR.  
#1617  
TAMPA, FL 33647 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:

04/11/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: ANDERSON, JOSHUA  
Address: 14904 PERRIWINLE CT.  
City-St-Zip: TAMPA, FL 33625

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: ANDERSON, JOSHUA  
Address: 15210 AMBERLY DR.  
City-St-Zip: TAMPA, FL 33647

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOSHUA ANDERSON

D

04/11/2005

Electronic Signature of Signing Officer or Director

Date