2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000085525

Entity Name: MJW CONSOLIDATED, INC.

FILED Feb 12, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3805 FAYE ROAD JACKSONVILLE, FL 32226 **Current Mailing Address: New Mailing Address:** PO BOX 26829 JACKSONVILLE, FL 32226 FEI Number: 59-3740458 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WOOD, MARK S 3805 FAYE ROAD JACKSONVILLE, FL 32226 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PD() Delete Title: (X) Change () Addition WOOD, MARK S Name: Name: WOOD, MARK S 3805 FAYE ROAD 1286 PONTE VEDRA BLVD Address: Address: City-St-Zip: JACKSONVILLE, FL 32226 City-St-Zip: PONTE VEDRA BEACH, FL 32082 Title: (X) Change () Addition Title: S. D () Delete Name: NEMETH, ANNMARIE M Name: NEMETH, ANNMARIE M 3805 FAYE RD 1197 NATURES HAMMOCK ROAD S Address: Address: JACKSONVILLE, FL 32259 JACKSONVILLE, FL 32226 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition COLE, MARK H Name: Name: 2322 FOXHAVEN DRIVE, WEST Address: Address: JACKSONVILLE, FL 32224 City-St-Zip: City-St-Zip: Title: () Delete Title: (X) Change () Addition TANKERSLEY, DAVID W TANKERSLEY, DAVID W Name: Name: Address: 218 RIVER RIDGE RD Address: 322 OAK GROVE ISLAND DRIVE City-St-Zip: BRUNSWICK, GA 31525 City-St-Zip: BRUNSWICK, GA 31523 Title: Title: (X) Change () Addition () Delete AARON, EDWARD L OGNJENOVIC, ZARKO Name: Name: 2899 ROYAL OAKS DRIVE Address: 7085A A1A SOUTH Address: City-St-Zip: TALLAHASSEE, FL 32309 City-St-Zip: ST AUGUSTINE, FL 32080 Title: () Delete Title: () Change () Addition BOZEMAN, ALBERT L Name: Name: 311 OLD LOUISVILLE COURT Address: Address: City-St-Zip: City-St-Zip: GUYTON, GA 31312

I hereby certify that the information supplied with this filing does not qualify 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: MARK S. WOOD P, D 02/12/2008