


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 12, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P01000089961</b> 1. Entity Name JENNIFER L. BROWN-JACKSON D.M.D., P.A.	
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Principal Place of Business 2202 N. YOUNG BLVD. STE 406 CHIEFLAND, FL 32626	Mailing Address 2202 N. YOUNG BLVD. STE 406 CHIEFLAND, FL 32626
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**DO NOT WRITE IN THIS SPACE**



01052007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3755314	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  FINANCIAL FOUNDATIONS, INC. 3150 SANDY RIDGE DRIVE CLEARWATER, FL 33761
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**DO NOT WRITE  
IN THIS SPACE**

8. 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.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BROWN-JACKSON, JENNIFER L DMD 2202 N. YOUNG BLVD. STE 406 CHIEFLAND, FL 32626
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V JACKSON, SCOTT R 2202 N. YOUNG BLVD. STE 406 CHIEFLAND, FL 32626
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST BROWN, JASON M 2202 N. YOUNG BLVD. STE 406 CHIEFLAND, FL 32626
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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U00000633035  
02/21/07-80046-001 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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 607, 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.

<b>SIGNATURE:</b>  / Jennifer Brown-Jackson / 02-2007 / (352) 493-0099	Date	Daytime Phone #
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