2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000109919

Entity Name: J & K PROPERTIES OF VALRICO, INC.

FILED Mar 25, 2008 Secretary of State

1112 CALLISTA AVENUE 1112 CALLISTA AVENUE VALRICO, FL 33594 US VALRICO, FL 33596 US

Current Mailing Address: New Mailing Address:

1112 CALLISTA AVENUE 1112 CALLISTA AVENUE VALRICO, FL 33594 US VALRICO, FL 33596 US

FEI Number: 04-3596767 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:

FINLEY, JERRY D

1112 CALLISTA AVENUE

VALRICO, FL 33594 US

FINLEY, JERRY D

1112 CALLISTA AVENUE

VALRICO, FL 33596 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: 03/25/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: FINLEY, KATHRYN C Name: FINLEY, KATHRYN C

Address: 1112 CALLISTA AVENUE Address: 1112 CALLISTA AVENUE City-St-Zip: VALRICO, FL 33594 City-St-Zip: VALRICO, FL 33596

Title: ST () Delete Title: ST (X) Change () Addition Name: FINLEY, JERRY D Name: FINLEY, JERRY D

Address: 1112 CALLISTA AVENUE Address: 1112 CALLISTA AVENUE City-St-Zip: VALRICO, FL 33594 City-St-Zip: VALRICO, FL 33596

Title: V () Delete Title: () Change () Addition

 Name:
 ROEPKE, KENNETH
 Name:

 Address:
 6268 SPOON BILL DR
 Address:

 City-St-Zip:
 NEW PORT RICHEY, FL 34652
 City-St-Zip:

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: KATHRYN C. FINLEY PRES 03/25/2008