2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000017620

1. Entity Name
JPL24, INC.

Principal Place of Business	Mailing Address
2240 BELLEAIR RD., STE. 160 CLEARWATER, FL 33764	2240 BELLEAIR RD., STE. 160 CLEARWATER, FL 33764

DO NOT WRITE IN THIS SPACE

04222004   No Chg-P   CR2E034 (10/03)

4. FEI Number 04-3602857	Applied For
	Not Applicable

5. Certificate of Status Desired   ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

O'CONNOR, PATRICK M ESQ
O'CONNOR & ASSOCIATES
2240 BELLEAIR RD., STE. 160
CLEARWATER, FL 33764

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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_____

Signature, typed or printed name of registered agent and title if applicable   (NOTE. Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

U00000136899
04/28/04-80102-003 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	MASSINGILL, J. LARRY
STREET ADDRESS	2240 BELLEAIR RD., STE. 160
CITY-ST-ZIP	CLEARWATER, FL 33764

TITLE	
NAME	
STREET ADDRESS	
CITY ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify 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 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.

SIGNATURE: _Jesse L. Massingill_   JESSE L. MASSINGILL   4/22/04   813-885-5656

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #