


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT.**

FILED
Mar 30, 2007 08:00 AM
Secretary of State

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| DOCUMENT # P02000046367 1. Entity Name JL BUILDERS, INC. |  |
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| Principal Place of Business 4975 CANARY COURT ORANGE PARK, FL 32003 | Mailing Address PO BOX 1499 ORANGE PARK, FL 32067 |
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03052007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

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| 4. FEI Number 75-3050281 | Applied For Not Applicable |
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| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
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| 6. Name and Address of Current Registered Agent LAIN, JASON P 4975 CANARY COURT ORANGE PARK, FL 32003 |
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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

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | |
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| 10. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P LAIN, JASON P 4975 CANARY COURT ORANGE PARK, FL 32003 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP RODGERS, JEFF 2535 PATSY ANNE DR. JACKSONVILLE, FL 32207 |
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| <p>U000000683657 04/06/07-80001-007 150.00</p> <p>DO NOT WRITE IN THIS SPACE</p> |
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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.

SIGNATURE: Jason P. Lain Jason P. Lain President 3-3-07 (904) 610-4117
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #