

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000053548

FILED
Apr 19, 2004
Secretary of State

Entity Name: SHALYSIA JACKSON INC.

Current Principal Place of Business:

15171 NW 4 AVE
CITRA, FL 32113

New Principal Place of Business:

Current Mailing Address:

PO BOX 140322
GAINESVILLE, FL 32614

New Mailing Address:

PO BOX 432
REDDICK, FL 32686

FEI Number: 73-1646007

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACKSON, SHALYSIA
15171 NW 4 AVE
CITRA, FL 32113 US

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: JACKSON, LEE
Address: PO BOX 732
City-St-Zip: ORANGE LAKE, FL 28681

Title: V () Delete
Name: JACKSON, MARY
Address: PO BOX
City-St-Zip: REDDICK, FL 32686

Title: T () Delete
Name: CLINTON, LAVETT
Address: PO BOX 307
City-St-Zip: CITRA, FL 32113

Title: S () Delete
Name: THOMAS, SHAKIRA
Address: 15171 NW 4 AVE
City-St-Zip: CITRA, FL 32113

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LEE JACKSON

P

04/19/2004

Electronic Signature of Signing Officer or Director

_____ Date