## 2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Apr 25, 2005 08:00 AM Secretary of State DOCUMENT # P02000074552 1. Entity Name JNM FERNANDINA, INC. Principal Place of Business Mailing Address 432 OSCEOLA AVENUE 432 OSCEOLA AVENUE JACKSONVILLE BEACH, FL 32250 JACKSONVILLE BEACH, FL 32250 No Chg-P CR2E034 (10/03) 01202005 DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 55-0788167 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HATHAWAY, RICHARD G DO NOT WRITE 50 A1A NORTH **SUITE 102** IN THIS SPACE PONTE VEDRA BEACH, FL 32082 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. 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. U00000329321 TITLE MCGARVEY, JAMES N JR. NAME 04/25/05-80112-012 150.00 432 OSCEOLA AVE STREET ADDRESS CITY-ST-ZIP JACKSONVILLE BEACH, FL 32250 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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 supplier entitle 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.

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SIGNATURE:

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