2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000081299

Entity Name: SJA, INC.

FILED Jan 05, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3690 HEARTWOOD LANE 1928 SOUTH PATRICK DRIVE

MELBOURNE, FL 32934 INDIAN HARBOUR BEACH, FL 32937

Current Mailing Address: New Mailing Address:

2936 MAYFAIR COURT 1928 SOUTH PATRICK DRIVE

CLEARWATER, FL 33761 INDIAN HARBOUR BEACH, FL 32937

FEI Number: 51-0422634 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:

MORRISON, DOUGLAS

2936 MAYFAIR COURT

MORRISON, DOUGLAS

1928 SOUTH PATRICK DRIVE

CLEARWATER, FL 33761 US INDIAN HARBOUR BEACH, FL 32937 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: 01/05/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

 Title:
 MGRM () Delete

 Name:
 MOREEN, MARGO

 Address:
 2936 MAYFAIR COURT

 City-St-Zip:
 CLEARWATER, FL 33761

Title: MGRM () Delete
Name: MOREEN, DOUGLAS
Address: 2936 MAYFAIR COURT
City-St-Zip: CLEARWATER, FL 33761

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MGRM (X) Change () Addition
Name: MORRISON, MARGO
Address: 1928 SOUTH PATRICK DRIVE
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

Title: MGRM (X) Change () Addition
Name: MORRISON, DOUGLAS
Address: 1928 SOUTH PATRICK DRIVE
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

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: DOUGLAS MORRISON PRES 01/05/2005