

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P02000110410

1. Entity Name
J.P. FLEET CONSULTANTS, INC.



Principal Place of Business
**5536 WEST BAYSHORE DRIVE
PORT ORANGE, FL 32127 US**

Mailing Address
**5536 WEST BAYSHORE DRIVE
PORT ORANGE, FL 32127 US**

**FILED
Jul 03, 2008 08:00 AM
Secretary of State**



07022008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 16-1644686	Applied For <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**BAILEY & TRUMBO, P.A.
340 N. CAUSEWAY
NEW SMYRNA BEACH, FL 32169**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008**

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIR. PEACOCK, ROSCOE III 5536 WEST BAYSHORE DRIVE PORT ORANGE, FL 32127
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**DO NOT WRITE
IN THIS SPACE**

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 names empowered.

SIGNATURE: *Roscoe Peacock III*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/2/08 386-527-8654
Date Daytime Phone #