

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000116392

Entity Name: JAX REALTY PROS, INC.

FILED
Jan 05, 2004
Secretary of State

Current Principal Place of Business:

9825 SAN JOSE BLVD STE 42
JACKSONVILLE, FL 32257

New Principal Place of Business:

Current Mailing Address:

9825 SAN JOSE BLVD STE 42
JACKSONVILLE, FL 32257

New Mailing Address:

FEI Number: 74-3072496

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAYLOR, GLENN A
462 KINGSLEY AVE STE 103
ORANGE PARK, FL 32073 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: PART (X) Delete
Name: LEWIS, REBECCA
Address: 1825 SCOTT MILL PLACE
City-St-Zip: JACKSONVILLE, FL 32223

Title: PART () Delete
Name: WALLACE, DEBORAH
Address: 1424 TINKERN LANE
City-St-Zip: SAINT AUGUSTINE, FL 32092

Title: PART (X) Delete
Name: GLASS, JERRY
Address: 428 ST JOHNS DRIVE
City-St-Zip: SAINT AUGUSTINE, FL 32092

Title: PART (X) Delete
Name: BROCK ABEL, WILLIAM
Address: 2151 DELLWOOD AVE
City-St-Zip: JACKSONVILLE, FL 32204

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PART (X) Change () Addition
Name: WALLACE, DEBORAH
Address: 1424 TINTERN LANE
City-St-Zip: SAINT AUGUSTINE, FL 32092

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: DEBORAH WALLACE

OWNE

01/05/2004

Electronic Signature of Signing Officer or Director

_____ Date