

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000121827

Entity Name: TROY JENKINS, PA

FILED
Apr 28, 2008
Secretary of State

Current Principal Place of Business:

2704 BEE RIDGE RD
SUITE 200
SARASOTA, FL 34239 US

New Principal Place of Business:

6242 AVENTURA DR
SARASOTA, FL 34241 US

Current Mailing Address:

2704 BEE RIDGE RD
SUITE 200
SARASOTA, FL 34239 US

New Mailing Address:

6242 AVENTURA DR
SARASOTA, FL 34241 US

FEI Number: 06-1662160

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JENKINS, TROY
6242 AVENTURA DR
SARASOTA, FL 34241 US

Name and Address of New Registered Agent:

JENKINS, TROY D DIR
6242 AVENTURA DR
SARASOTA, FL 34241 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: TROY D JENKINS

04/28/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JENKINS, TROY
Address: 4509 BEE RIDGE RD STE C
City-St-Zip: SARASOTA, FL 34233

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: JENKINS, TROY PRES
Address: 6242 AVENTURA DR
City-St-Zip: SARASOTA, FL 34241

Title: VP () Change (X) Addition
Name: JENKINS, TROY VP
Address: 6242 AVENTURA DR
City-St-Zip: SARASOTA, FL 34241

Title: T () Change (X) Addition
Name: JENKINS, TROY TRES
Address: 6242 AVENTURA DR
City-St-Zip: SARASOTA, FL 34241

Title: S () Change (X) Addition
Name: TROY, JENKINS S
Address: 6242 AVENTURA DR
City-St-Zip: SARASOTA, FL 34241

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: TROY D JENKINS

D

04/28/2008

Electronic Signature of Signing Officer or Director

Date