2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000128450

- 444 **N**

Entity Name: JACKSONVILLE SEASONS HOLDINGS INC.

FILED Apr 26, 2005 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
3617 NW 29TH ST GAINSVILLE, FL 32605				1670 WELLS ROAD SUITE 9 ORANGE PARK, FL 32073	
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
3617 NW 2 GAINSVILL	29TH ST LE, FL 32605				
FEI Number:	35-2190577 FE	l Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
The above	EMAN RD VILLE, FL 32207	US nits this statement for the p	ourpose of changing its registe	red office or registered agent, or both,	
SIGNATUF	RE:				
	Electronic Si	gnature of Registered Age	ent	Date	
Election Can	npaign Financing Trus	st Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DPS () Delet SMITH, ESSIE M 3670 FREEMAN RD JACKSONVILLE, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DVT () Delet SMITH, LORRAINE P 3617 NW 29TH ST GAINSVILLE, FL 326		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: LORRAINE P. SMITH DVT 04/26/2005