

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2006 8:00 am
Secretary of State

04-14-2006 90125 001 ***150.00

DOCUMENT # P03000006823

1. Entity Name
JPH SERVICES, INC.



Principal Place of Business
**410 SE GASPARILLA AVENUE
PORT ST. LUCIE, FL 34983 US**

Mailing Address
**410 SE GASPARILLA AVENUE
PORT ST. LUCIE, FL 34983 US**

2. Principal Place of Business
4305 South 25th Street
Suite, Apt. #, etc.

3. Mailing Address
P.O. Box 881706
Suite, Apt. #, etc.

City & State
Fort Pierce, FL
Zip
34981

Country
St. Lucie

City & State
Port St. Lucie, FL
Zip
34988

Country
St. Lucie

01302006 Chg-P CR2E034 (11/05)

4. FEI Number
57-1147417

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**HAYDEN, BEVERLY A
410 SE GASPARILLA AVENUE
PORT ST. LUCIE, FL 34998-3**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
2902 SERENITY CIRCLE SOUTH
City
FORT PIERCE **FL** Zip Code
34981

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D HAYDEN, JOHN P
410 SE GASPARILLA AVENUE
PORT ST. LUCIE, FL 34983** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D HAYDEN, BEVERLY A
410 SE GASPARILLA AVENUE
PORT ST. LUCIE, FL 34983** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P Hayden, John P
2902 Serenity Cir. S.
Ft Pierce, FL 34981** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP. HAYden, Beverly A
2902 Serenity Cir. S.
Ft. Pierce FL 34981** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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 like empowered.

SIGNATURE: *Beverly Hayden* **Beverly Hayden**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/30/06

Date

Daytime Phone #