

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90445 032 ***150.00

DOCUMENT # P03000040610

1. Entity Name

JPC GROUP INC.



Principal Place of Business

1850 OLEANDER STREET
SARASOTA FL 34239

Mailing Address

1850 OLEANDER STREET
SARASOTA FL 34239

2. Principal Place of Business

7304 BANCLAY COURT

Suite, Apt. #, etc.

3. Mailing Address

7304 BANCLAY COURT

Suite, Apt. #, etc.



1st MOORE

CR2E034 (10/04)

City & State

UNIVERSITY PARK, FL

Zip
34201

Country

USA

City & State

UNIVERSITY PARK, FL

Zip

34201

Country

USA

4. FEI Number

02-0681067

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KING, CLIFFORD M
2033 MAIN STREET
SUITE 303
SARASOTA FL 34237

7. Name and Address of New Registered Agent

Name

JAMES PHILIP COOK

Street Address (P.O. Box Number is Not Acceptable)

7304 BANCLAY COURT

City

UNIVERSITY PARK

FL

Zip Code

34201

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

J. Phil Cook, J. Phil Cook, President

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, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PA	<input type="checkbox"/> Delete
NAME	COOK, J. PITIL	
STREET ADDRESS	1850 OLEANDER ST.	
CITY-ST-ZIP	SARASOTA FL 34239	

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
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CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

J. Phil Cook President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/05 941-266-8081

Date

Daytime Phone #