2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000077098

Entity Name: JIM'S GRIPS AND ACCESSORIES, INC.

Current Principal Place of Business:	**New Principal Place of Business:**
P.O. BOX 740397 DELTONA, FL 32738	2791 MALDIVE COURT DELTONA, FL 32738

Current Mailing Address:	**New Mailing Address:**
P.O. BOX 740397 DELTONA, FL 32738	

FEI Number: 65-1194154   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
BURKETT, JAMES JR 3341 SKY STREET DELTONA, FL 32738 US	BURKETT, JAMES JR 2791 MALDIVE COURT DELTONA, FL 32738 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: _____   05/23/2005
                     Electronic Signature of Registered Agent   Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:	**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**
Title: PD ( ) Delete Name: BURKETT, JAMES JR Address: POST OFFICE BOX 740397 City-St-Zip: ORANGE CITY, FL 32774	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: STD ( ) Delete Name: BURKETT, JANET Address: POST OFFICE BOX 740397 City-St-Zip: ORANGE CITY, FL 32774	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: JAMES BURKETT   PD   05/23/2005
                     Electronic Signature of Signing Officer or Director   Date