

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000094795

1. Entity Name
JB'S TRACTOR WORK, INC.



Principal Place of Business
4803 CHERWELL LANE
JACKSONVILLE, FL 32217 US

Mailing Address
4803 CHERWELL LANE
JACKSONVILLE, FL 32217 US

DO NOT WRITE IN THIS SPACE



01302006 No Chg-F CR2E034 (11/05)

4. FEI Number 73-1689269	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

BRANDVOLD, JEROME P
4803 CHERWELL LANE
JACKSONVILLE, FL 32217

**DO NOT WRITE
IN THIS SPACE**

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 resigning)

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

U00000527062
05/04/06-30098-020 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	BRANDVOLD, JEROME P
STREET ADDRESS	4803 CHERWELL LANE
CITY-ST-ZIP	JACKSONVILLE, FL 32217

TITLE	VP
NAME	BRANDVOLD, MARK A
STREET ADDRESS	6351 KENNY ROAD
CITY-ST-ZIP	JACKSONVILLE, FL 32254

TITLE	SEC
NAME	BRANDVOLD, MARGARET K
STREET ADDRESS	4803 CHERWELL LANE
CITY-ST-ZIP	JACKSONVILLE, FL 32217

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

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:

Jerome P. Brandvold
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jerome P. Brandvold
Date

4-18-06
Daytime Phone # *904 769-1676*