

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000104321

Entity Name: J WOODS ENTERPRISES INC

FILED
Apr 30, 2006
Secretary of State

Current Principal Place of Business:

5644 63RD LANE NORTH
ST PETERSBURG, FL 33709

New Principal Place of Business:

215 176TH TERRACE DR. E
REDINGTON SHORES, FL 33708

Current Mailing Address:

5644 63RD LANE NORTH
ST PETERSBURG, FL 33709

New Mailing Address:

215 176TH TERRACE DR. E
REDINGTON SHORES, FL 33708

FEI Number: 52-2443956

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOODS, JAMES
5644 63RD LANE NORTH
ST PETERSBURG, FL 33709 US

Name and Address of New Registered Agent:

WOODS, JAMES
215 176TH TERRACE DR. E
REDINGTON SHORES, FL 33708 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:

04/30/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: WOODS, JAMES
Address: 5644 63RD LANE NORTH
City-St-Zip: ST PETERSBURG, FL 33709

Title: VP () Delete
Name: WOODS, LISA
Address: 5644 63RD LANE NORTH
City-St-Zip: ST PETERSBURG, FL 33709

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: WOODS, JAMES
Address: 215 176TH TERRACE DR. E
City-St-Zip: REDINGTON SHORES, FL 33708

Title: VP (X) Change () Addition
Name: WOODS, LISA
Address: 215 176TH TERRACE DR. E
City-St-Zip: REDINGTON SHORES, FL 33708

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: LISA WOODS

VP

04/30/2006

Electronic Signature of Signing Officer or Director

Date