

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000107965

Entity Name: CAPITAL "J" INCORPORATED

FILED  
May 01, 2008  
Secretary of State

## Current Principal Place of Business:

2910 SELAWICK LANE  
JACKSONVILLE, FL 32218

## New Principal Place of Business:

4550 ST. AUGUSTINE ROAD  
SUITE 2  
JACKSONVILLE, FL 32207

## Current Mailing Address:

PO BOX 26372  
JACKSONVILLE, FL 32226

## New Mailing Address:

FEI Number: 20-0295517

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WILSON, JAY E  
10875 NATALIE ASH DRIVE  
JACKSONVILLE, FL 32218 US

## Name and Address of New Registered Agent:

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:

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:

Title: P ( ) Delete  
Name: WILSON, JAY  
Address: 2910 SELAWICK LANE  
City-St-Zip: JACKSONVILLE, FL 32218

Title: D ( ) Delete  
Name: LYLES, MARCUS  
Address: 6255 GREEN PINE LANE  
City-St-Zip: JACKSONVILLE, FL 32277

Title: D ( ) Delete  
Name: WILLIAMS, WALTER  
Address: 11513 KINGS RIDGE COURT S.  
City-St-Zip: JACKSONVILLE, FL 32218

Title: D ( ) Delete  
Name: ROBINSON, WILLIE  
Address: 2404 EMILY DRIVE  
City-St-Zip: JACKSONVILLE, FL 32216

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: WILSON, JAY  
Address: 10875 NATALIE ASH DRIVE  
City-St-Zip: JACKSONVILLE, FL 32218

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JAY WILSON

PRES

05/01/2008

Electronic Signature of Signing Officer or Director

Date