2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000109142

Entity Name: J & M HOME IMPROVEMENTS, INC.

FILED Mar 15, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Principal Place of Business:	New Principal Place of Business:

2 MARLOW RAOD 2 MARLOW ROAD

FROSTPROOF, FL 33843 FROSTPROOF, FL 33843

Current Mailing Address: New Mailing Address:

2 MARLOW RAOD 2 MARLOW ROAD

FROSTPROOF, FL 33843 FROSTPROOF, FL 33843

FEI Number: 20-0289630 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:

NEFF, MARY K
2 MARLOW RAOD
NEFF, MARY K
2 MARLOW ROAD

FROSTPROOF, FL 33843 US FROSTPROOF, FL 33843 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: 03/15/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: NEFF, JAMES W Name: NEFF, JAMES W

 Address:
 2 MARLOW RAOD
 Address:
 2 MARLOW ROAD

 City-St-Zip:
 FROSTPROOF, FL 33843
 City-St-Zip:
 FROSTPROOF, FL 33843

Title: VP () Delete Title: VP (X) Change () Addition Name: NEFF, MARY K Name: NEFF, MARY K

Address: 2 MARLOW RD. Address: 2 MARLOW ROAD

City-St-Zip: FROSTPROOF, FL 33843 City-St-Zip: FROSTPROOF, FL 33843

Title: () Delete Title: SEC () Change (X) Addition

 Name:
 Name:
 SMITH, MICHAEL D

 Address:
 Address:
 1633 S SCENIC HWY

 City-St-Zip:
 City-St-Zip:
 FROSTPROOF, FL 33843

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: MARY K. NEFF VP 03/15/2007