2007 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED Mar 21, 2007 8:00 am Secretary of State

03-21-2007 90032 041 ***150.00

JTL CORP. OF PUTNAM COUNTY 60026084 Principal Place of Business Mailing Address 132 LAKEVIEW COURT 132 LAKEVIEW COURT INTERLACHEN, FL 32148 INTERLACHEN, FL 32148 **ene** Suite, Apt. #, etc. 01172007 Chg-P CR2E034 (12/06) Applied For 4. FEI Number 52-2405348 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HARS, LESTER 132 LAKEVIEW COURT INTERLACHEN, FL 32148 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 the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. SD TITLE Delete Change Addition TITLE NAME HARS, DOROTHY 132 LAKE VIEW COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP INTERLACHEN, FL 32148 CITY-ST-ZIP PVD TITLE ☐ Delete HILE Addition HARS, LESTER NAME NAME STREET ADDRESS 132 LAKEVIEW COURT STREET ADDRESS CITY-ST-ZIF INTERLACHEN, FL 32148 CITY-ST-ZIP TITLE ☐ Delete TITLE Addition Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete THLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS

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 exercise 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 attachington with an address with all other like empowered.

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changed, or on an attachment with an address with all other like empowered.