

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000124474

Entity Name: STEPHEN JEFFRIES, INC.

FILED
Dec 14, 2006
Secretary of State

Current Principal Place of Business:

2549 HIGHLAND ACRES DR.
CLEARWATER, FL 33761

New Principal Place of Business:

Current Mailing Address:

2549 HIGHLAND ACRES DR.
CLEARWATER, FL 33761

New Mailing Address:

FEI Number: 83-0376163

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JEFFRIES, STEPHEN
2549 HIGHLAND ACRES DR.
CLEARWATER, FL 33761 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JEFFRIES, STEPHEN
Address: 2549 HIGHLAND ACRES DR.
City-St-Zip: CLEARWATER, FL 33761

Title: V () Delete
Name: JEFFRIES, JOANN
Address: 2549 HIGHLAND ACRES DR.
City-St-Zip: CLEARWATER, FL 33761

Title: S () Delete
Name: EARL, JEFFREY
Address: 5902 43RD.AVE. N.
City-St-Zip: ST. PETERSBURG, FL 33709

Title: D (X) Delete
Name: EARL, BOBBY R
Address: 2549 HIGHLAND ACRES DRIVE
City-St-Zip: CLEARWATER, FL 33761

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: EARL, BOBBY
Address: 2459 HIGHLAND ACRES DRIVE
City-St-Zip: CLEARWATER, FL 33761

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

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: BOBBY EARL

S

12/14/2006

Electronic Signature of Signing Officer or Director

Date