

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000126483

FILED
Apr 02, 2008
Secretary of State

Entity Name: JACKSONVILLE TEA COMPANY

Current Principal Place of Business:

6817 SOUTHPOINT PARKWAY
SUITE 1503
JACKSONVILLE, FL 32216 US

New Principal Place of Business:

8550 CROOKED TREE DRIVE
JACKSONVILLE, FL 32256 US

Current Mailing Address:

6817 SOUTHPOINT PARKWAY
SUITE 1503
JACKSONVILLE, FL 32216 US

New Mailing Address:

PO BOX 550588
JACKSONVILLE, FL 32255 US

FEI Number: 20-0370309

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILSON, GEORGE A
8550 CROOKED TREE DRIVE
JACKSONVILLE, FL 32256 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: WILSON, GEORGE A
Address: 6817 SOUTHPOINT PKWY STE 1503
City-St-Zip: JACKSONVILLE, FL 32216 US

Title: VTD () Delete
Name: BARKER, CRAIG
Address: 6817 SOUTHPOINT PKWY STE 1503
City-St-Zip: JACKSONVILLE, FL 32216 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: WILSON, GEORGE A
Address: 8550 CROOKED TREE DRIVE
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: VTD (X) Change () Addition
Name: BARKER, CRAIG
Address: 1730 COUNTRY WALK DRIVE
City-St-Zip: ORANGE PARK, FL 32003 US

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: GEORGE A. WILSON

PSD

04/02/2008

Electronic Signature of Signing Officer or Director

Date