

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000139940

FILED  
Jan 18, 2005  
Secretary of State

Entity Name: JET SERVICES OF NORTH FLORIDA, INC.

## Current Principal Place of Business:

355 GARDEN ST  
KEYSTONE HEIGHTS, FL 32656

## New Principal Place of Business:

## Current Mailing Address:

355 GARDEN ST  
KEYSTONE HEIGHTS, FL 32656

## New Mailing Address:

FEI Number: 75-3138326

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FORAY, TOM  
355 GARDEN ST  
KEYSTONE HEIGHTS, FL 32656 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: D ( ) Delete  
Name: FORAY, TOM  
Address: 355 GARDEN ST  
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: D ( ) Delete  
Name: FORAY, JOCELYN  
Address: 355 GARDEN ST  
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D ( ) Change (X) Addition  
Name: HARRINGTON, JUSTIN  
Address: 355 GARDEN STREET  
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TOM FORAY

D

01/18/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date