2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 15, 2008 8:00 am
Secretary of State
04-15-2008 90021 049 ***150.00

DOCUMENT # P03000142323

1. Entity Name

THE DOOR DOCTOR OF JAX., INC.

Principal Place of Business	Mailing Address
~~9480 PRINCETON SQUARE BLVD. S., #202 JACKSONVILLE FL 32256~~	~~9480 PRINCETON SQUARE BLVD. S., #202 JACKSONVILLE FL 32256~~

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
284 Ventura Rd	284 Ventura Rd
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: St. Augustine, Florida	City & State: St. Augustine, Florida
Zip: 32080 Country: St. Johns	Zip: 32080 Country: St Johns

1st MOORE CR2E034 (10/07)

4. FEI Number 20-0442605 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PUHALLA, THOMAS J ~~9480 PRINCETON SQUARE BLVD. S., #202 JACKSONVILLE FL 32256~~ 284 Ventura Rd. St. Augustine, Florida 32080	Name: ~~PUHALLA~~ Puhalla Thomas J. Street Address (P.O. Box Number is Not Acceptable): 284 Ventura Rd City: St. Augustine FL Zip Code: 32080

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 with, and accept the obligations of registered agent.

SIGNATURE: Thomas J. Puhalla - Thomas Puhalla - President 3-31-2008
Signature, typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee Will Be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PSTD PUHALLA, THOMAS J ~~9480 PRINCETON SQUARE BLVD. S., #202~~ ~~JACKSONVILLE FL 32256~~	☐ Delete	PSTD Puhalla, Thomas J. (No Change) 284 Ventura Rd. St Augustine, Florida 32080 (Changed Address)	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 receiver 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 attachment with an address, with another like empowered.

SIGNATURE: Thomas J. Puhalla - Thomas J Puhalla 3-31-2008 (904) 448-0422
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #