2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000157164

Entity Name: JIM ANDERSON ENTERPRISES, INC

FILED Apr 30, 2008 Secretary of State

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Current Principal Place of Business:					New Principal Place of Business:				
1170 SW 107 TERRACE FORT LAUDERDALE, FL 33324					1170 SW 107 TERRACE DAVIE, FL 33324				
Current Mailing Address:					New Mailing Address:				
1170 SW 107 TERRACE FORT LAUDERDALE, FL 33324					1170 SW 107 TERRACE DAVIE, FL 33324				
FEI Number:	59-3774799	FEI Numb	per Applied For ()	FEI Num	nber Not Appl	icable ()	Certifica	te of Status De	sired ()
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:				
ANDERSON, JAMES M 1170 SW 107 TERRACE FORT LAUDERDALE, FL 33324 US					ANDERSON, JAMES M 1170 SW 107 TERRACE DAVIE, FL 33324 US				
The above in the State		ubmits thi	s statement for the pu	irpose of	f changing it	ts registered	d office or re	egistered age	ent, or both,
SIGNATURE:					04/30/2008				
Electronic Signature of Registered Agent					Date				
Election Carr	paign Financing	Trust Fund	d Contribution ().						
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	P () ANDERSON, JA 1170 SW 107 T FORT LAUDERI	ERRACE	3324		Title: Name: Address: City-St-Zip:	P ANDERSON 1170 SW 10 DAVIE, FL 3	7 TERRACE) Addition	
Title: Name: Address: City-St-Zip:	ST (X) ANDERSON, JA 411 S HOLLYBF PEMBROKE PIN	ROOK DR, E			Title: Name: Address: City-St-Zip:		() Change() Addition	
Title: Name: Address: City-St-Zip:	V () SPIRES, KENT 19830 SW 326 HOMESTEAD, F				Title: Name: Address: City-St-Zip:		()Change() Addition	

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: JAMES M. ANDERSON P 04/30/2008