## 2008 FOR PROFIT CORPORATION

## **FILED ANNUAL REPORT** Apr 21, 2008 08:00 A Secretary of State **DOCUMENT # P03000158236** JERRY ROUSH, INC. Principal Place of Business Mailing Address 426 RED PINE CT. 426 RED PINE CT. ORMOND BEACH, FL 32174 ORMOND BEACH, FL 32174 03312008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 51-0492017 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ROUSH, JERRY DO NOT WRITE 426 RED PINE CT. ORMOMD BEACH, FL 32174 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) LICHTONIA (PARE) 7 95797798-89996-013 150 JB 9. Election Campaign Financing \$5.00 May Be FILE NOWILL FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME ROUSH, JERRY STREET ADDRESS 426 RED PINE CT. CITY-ST-ZIP ORMOND BEACH, FL 32174 TITLE NAME STREET ADDRESS CiTY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITI F IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 all other like empowered.

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7tP