

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000016331

FILED
Apr 27, 2006
Secretary of State

Entity Name: JS PERFORMANCE CONSULTING INC.

Current Principal Place of Business:

14655 PLUMOSA DRIVE
JACKSONVILLE BCH, FL 32224

New Principal Place of Business:

903 THIRD ST. EAST
RIVIERA DUNES, FL 34221

Current Mailing Address:

14655 PLUMOSA DRIVE
JACKSONVILLE BCH, FL 32224

New Mailing Address:

903 THIRD ST. EAST
RIVIERA DUNES, FL 34221

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 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: V () Delete
Name: STUDER, THOMAS
Address: 14655 PLUMOSA DRIVE
City-St-Zip: JACKSONVILLE BCH, FL 32250

Title: P () Delete
Name: PITERA, DR. JO-ANNE
Address: 14655 PLUMOSA DRIVE
City-St-Zip: JACKSONVILLE BCH, FL 32250

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change () Addition
Name: STUDER, THOMAS
Address: 903 THIRD ST. EAST
City-St-Zip: RIVIERA DUNES, FL 34221

Title: P (X) Change () Addition
Name: STUDER, DR. JO-ANNE
Address: 903 THIRD ST. EAST
City-St-Zip: RIVIERA DUNES, FL 34221

I hereby certify that the information supplied with this filing does not qualify for the 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: TOM STUDER

VP

04/27/2006

Electronic Signature of Signing Officer or Director

Date