

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P04000018942

1. Entity Name
JEFFREY MANN, INC.



Principal Place of Business
448 NORTH BRIDGESTONE AVENUE
JACKSONVILLE, FL 32259 US

Mailing Address
448 NORTH BRIDGESTONE AVENUE
JACKSONVILLE, FL 32259 US

FILED
Jan 09, 2006 08:00 AM
Secretary of State



01052006 No Chg-P CR2E034 (11/05)

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4. FEI Number
20-0662952

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

MANN, JEFFREY
448 NORTH BRIDGESTONE AVENUE
JACKSONVILLE, FL 32259

**DO NOT WRITE
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 reissuing)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PSTD
MANN, JEFFREY
448 NORTH BRIDGESTONE AVENUE
JACKSONVILLE, FL 32259

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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01/10/06-80009-023 150.00

**DO NOT WRITE
IN THIS SPACE**

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jeffrey Mann Jeffrey Mann

01/05/06

904-334-804

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #