

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000028449

FILED  
Mar 24, 2005  
Secretary of State

Entity Name: JAY'S REPAIR & CARPENTRY, INC.

## Current Principal Place of Business:

6182 WEST DEEPWOOD DRIVE  
JACKSONVILLE, FL 322442620

## New Principal Place of Business:

6182 WEST DEEPWOOD DRIVE  
JACKSONVILLE, FL 322442620 US

## Current Mailing Address:

6182 WEST DEEPWOOD DRIVE  
JACKSONVILLE, FL 322442620

## New Mailing Address:

6182 WEST DEEPWOOD DRIVE  
JACKSONVILLE, FL 322442620

FEI Number: 20-0667103

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JASON, WILSON A  
6182 WEST DEEPWOOD DRIVE  
JACKSONVILLE, FL 322442620 US

## Name and Address of New Registered Agent:

JASON, WILSON A  
6182 WEST DEEPWOOD DRIVE  
JACKSONVILLE, FL 322442620 US

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: JASON A. WILSON

03/24/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: JASON, WILSON A  
Address: 6182 WEST DEEPWOOD DRIVE  
City-St-Zip: JACKSONVILLE, FL 322442620

Title: D ( ) Delete  
Name: DENISE, WILSON R  
Address: 6182 WEST DEEPWOOD DRIVE  
City-St-Zip: JACKSONVILLE, FL 322442620

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: JASON, WILSON A  
Address: 6182 WEST DEEPWOOD DRIVE  
City-St-Zip: JACKSONVILLE, FL 322442620

Title: DST (X) Change ( ) Addition  
Name: DENISE, WILSON R  
Address: 6182 WEST DEEPWOOD DRIVE  
City-St-Zip: JACKSONVILLE, FL 322442620

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JASON A. WILSON

DP

03/24/2005

Electronic Signature of Signing Officer or Director

Date