2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000049204

Entity Name: JERGER HOLDING CORPORATION

FILED Apr 28, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1528 LAKE VIEW RD CLEARWATER, FL 33756 US					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
POB 5400 LARGO, FL 33779 US			PO BOX 5400 LARGO, FL 33779		
FEI Number: 2	20-2257488	FEI Number Applied For ()	El Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Cเ	ırrent Registered Agent:	Name and Address of	of New Registered Agent:	
BLACKLIDGE, RAYMOND M 28810 FALLING LEAVES WAY WESLEY CHAPEL, FL 33543 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:					
	Electronic	Signature of Registered Agent		Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CEO () [JERGER, THOM, 5900 98TH AVE. PINELLAS PARK	N	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P ()[JERGER, JOHN 1961 COVE LAN CLEARWATER, I	Ē	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () E BLACKLIDGE, R 28810 FALLING ZEPHYRHILLS, F	LEAVES WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VATTER, DOUG 8 RIVERSIDE DE	Delete R HUDSON, NY 12520	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D ()[VANCHUCK, JOE 6827 1ST AVE S SAINT PETERSB	STE 100	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () [MORSON, CHRIS 1207 NE 82ND S MIAMI, FL 33138	Т	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: RAYMOND M BLACKLIDGE S 04/28/2008