

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000051596

Entity Name: JAXANDLES ENTERPRISES, INC.

FILED  
Apr 21, 2007  
Secretary of State

## Current Principal Place of Business:

6500 WINEGARD RD  
SUITE 120  
ORLANDO, FL 32809 US

## New Principal Place of Business:

## New Mailing Address:

3021 BRANSBURY CT  
KISSIMMEE, FL 34747 US

## Current Mailing Address:

200 WALLEYE DR  
50989 HWY 27 LOT 200  
DAVENPORT, FL 33897 US

FEI Number: 20-1273127

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WRIGHT, LESLIE P  
6500 WINEGARD ROAD  
SUITE 120  
ORLANDO, FL 32809 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: PD ( ) Delete  
Name: WRIGHT, LESLIE P  
Address: 50989 HIGHWAY 27 LOT 200  
City-St-Zip: DAVENPORT, FL 33897 US

Title: VPD ( ) Delete  
Name: WRIGHT, JACQUELINE  
Address: 50989 HIGHWAY 27 LOT 200  
City-St-Zip: DAVENPORT, FL 33897 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: WRIGHT, LESLIE P  
Address: 3021 BRANSBURY CT  
City-St-Zip: KISSIMMEE, FL 34747 US

Title: VPD (X) Change ( ) Addition  
Name: WRIGHT, JACQUELINE  
Address: 3021 BRANSBURY CT  
City-St-Zip: KISSIMMEE, FL 34747 US

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: LESLIE P WRIGHT

PD

04/21/2007

Electronic Signature of Signing Officer or Director

Date