2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000051928

1. Entity Name
JEFF'S AT HOME SERVICES, INC.

Principal Place of Business	Mailing Address
2912 FOREST LN SARASOTA, FL 34231	P O BOX 15913 SARASOTA, FL 34277

DO NOT WRITE IN THIS SPACE

01252007   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
20-0922865	Not Applicable

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

6. Name and Address of Current Registered Agent

WILSON, MICHAEL J
200 S ORANGE AVE
SARASOTA, FL 34236

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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 reinstating)   DATE

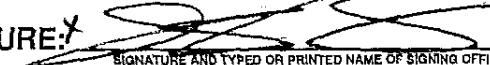| FILE NOW!!! FEE IS $150.00 After May 1, 2007 Fee will be $550.00	9. Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	U00000616178 02/07/07-80017-016 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	BERNIUS, JEFFREY S
STREET ADDRESS	7375 RIM RD
CITY-ST-ZIP	SARASOTA, FL 34240
TITLE	VTS
NAME	BERNIUS, JASON S
STREET ADDRESS	2912 FOREST LN
CITY-ST-ZIP	SARASOTA, FL 34231
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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

SIGNATURE: X _____   X 01-28-07   X 941-302-0911
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #

Jeffrey S. Bernius