

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

4. **FILED**
May 27, 2005 8:00 am
Secretary of State

04-27-2005 90317 008 ***150.00

DOCUMENT # P04000066469					
1. Entity Name JACRE MANAGEMENT COMPANY, INC.					
Principal Place of Business 811-15TH AVENUE WEST PALMETTO, FL 34221			Mailing Address 811-15TH AVENUE WEST P.O. Box 305 PALMETTO, FL 34221 34220		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		Country	
6. Name and Address of Current Registered Agent CREEL, JEANETTE M 811-15TH AVENUE WEST PALMETTO, FL 34221				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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: <div style="float: right; text-align: right;"> DATE: _____ </div>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CREEL, JEANETTE M 811-15TH AVENUE WEST PALMETTO, FL 34221	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CREEL, JEANETTE M 811-15TH AVENUE WEST PALMETTO, FL 34221	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CREEL, JEANETTE M 811-15TH AVENUE WEST PALMETTO, FL 34221	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CREEL, JEANETTE M 811-15TH AVENUE WEST PALMETTO, FL 34221	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	CREEL, JEANETTE M 811-15TH AVENUE WEST PALMETTO, FL 34221	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CREEL, JEANETTE M 811-15TH AVENUE WEST PALMETTO, FL 34221	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(d), 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: <div style="float: right; text-align: right;"> Jeanette M. Creel President </div>					

66019541



04082005 Chg-P CR2E034 (10/03)

4. FEI Number **56-2456197** Applied For Not Applicable
 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required