## 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

## Feb 12, 2007 8:00 am DOCUMENT # P04000111448 **Secretary of State** 02-12-2007 90106 002 \*\*\*150.00 J & S ACQUISITION CO., INC. Principal Place of Business Mailing Address 158 BARBERRY LANE PONTE VEDRA BEACH FL 32082 158 BARBERRY LANE PONTE VEDRA BEACH FL 32082 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State Applied For 4. FEI Number 51-0516892 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ESGUITE PATTERSON, BOND & LATSHAW 3010 SOUTH THIRD ST. JACKSONVILLE BEACH FL 32250 8. The above name entity sybmi egiste ed ag is this statement for the purpose of changing its reg d office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations SIGNATURE igent signature required where reinstating) (NOTE, Re NØW!!! FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10, DPT TITLE Delete TITLE ☐ Change ☐ Addition LATSHAW, JOHN H JR. NAM NAME 158 BARBERRY LANE STREET ADDRESS STREET ADDRESS PONTE VEDRA BEACH FL 32082 CITY-ST-ZIP CITY - ST - ZIP DVPS ШЕ ☐ Delete TITLE ☐ Change Addition LATSHAW, SUSAN F NALEF 158 BARBERRY LANE STRILET ADDRESS STREET ADDRESS PONTE VEDRA BEACH FL 32082 City ST-ZiP CITY - ST ZIP TITLE: ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY - ST - ZIP ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-SI-ZIP ☐ Defete THU. TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-S1-ZIP TITLE THE Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CHY-SI-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 logal effect as if made under oath; that I am an officer or director of the corporation or the receiver of trustop empowers in preciue V/s report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 of the corporation or if changed, or on an

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