

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000120110

FILED
Feb 23, 2006
Secretary of State

Entity Name: JDA PRINTING & PROMOTIONS, INC.

Current Principal Place of Business:

5760 MINING TERRACE
JACKSONVILLE, FL 32257

New Principal Place of Business:

Current Mailing Address:

5760 MINING TERRACE
JACKSONVILLE, FL 32257

New Mailing Address:

FEI Number: 51-0519098

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KLINGNER, LISA R
5760 MINING TERRACE
JACKSONVILLE, FL 32257 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: P () Delete
Name: KLINGNER, LISA R
Address: 10743 GELDING DRIVE
City-St-Zip: JACKSONVILLE, FL 32257

Title: VP () Delete
Name: ANCHEL, CRAIG A
Address: 3635 JAMESTOWN LANE
City-St-Zip: JACKSONVILLE, FL 32223

Title: S () Delete
Name: EWING, ROBYN D
Address: 7477 PLANTATION CLUB DRIVE
City-St-Zip: JACKSONVILLE, FL 32244

Title: T () Delete
Name: ANCHEL, PHYLLIS B
Address: 5760 MINING TERRACE
City-St-Zip: JACKSONVILLE, FL 32257

Title: D () Delete
Name: ANCHEL, DAVID
Address: 5760 MINING TERRACE
City-St-Zip: JACKSONVILLE, FL 32257

Title: D (X) Delete
Name: KIEPEK, WENDY T
Address: 1242 CONCORD HUNT DRIVE
City-St-Zip: BRENTWOOD, TN 37027

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: PHYLLIS B. ANCHEL

T

02/23/2006

Electronic Signature of Signing Officer or Director

Date