

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000142567

Entity Name: JACKMAN, INC.

FILED
Apr 11, 2006
Secretary of State

Current Principal Place of Business:

2730 ENTERPRISE RD
SUITE C
ORANGE CITY, FL 32763

New Principal Place of Business:

Current Mailing Address:

2730 ENTERPRISE RD
SUITE C
ORANGE CITY, FL 32763

New Mailing Address:

FEI Number: 20-1841337 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HITCHCOCK, SUSAN
2730 ENTERPRISE RD
SUITE C
ORANGE CITY, FL 32763 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: VP () Delete
Name: HITCHCOCK, SUSAN
Address: 192 POINCIANA LANE
City-St-Zip: DELTONA, FL 32738

Title: P () Delete
Name: HALLSTROM, JACK
Address: 192 POINCIANA LANE
City-St-Zip: DELTONA, FL 32738

Title: ST () Delete
Name: DAVISON, PATRICIA
Address: 1115 LONGVIEW RD
City-St-Zip: ROANOKE, VA 24018

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: HITCHCOCK, SUSAN
Address: 2730 ENTERPRISE ROAD, SUITE C
City-St-Zip: ORANGE CITY, FL 32763

Title: P (X) Change () Addition
Name: HALLSTROM, JACK
Address: 2730 ENTERPRISE ROAD, SUITE C
City-St-Zip: ORANGE CITY, FL 32763

Title: ST (X) Change () Addition
Name: DAVISON, PATRICIA
Address: 2730 ENTERPRISE ROAD, SUITE C
City-St-Zip: ORANGE CITY, FL 32763

I hereby certify that the information supplied with this filing does not qualify 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: PAT DAVISON

SECR

04/11/2006

Electronic Signature of Signing Officer or Director

Date