2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Nov 13, 2007
Secretary of State

DOCUMENT# P04000147973

Entity Name: JMC PROPERTY CARE, INC.

Current Principal Place of Business:

2025 J & C BLVD # 5
NAPLES, FL 34109

New Principal Place of Business:

Current Mailing Address:

2025 J & C BLVD # 5
NAPLES, FL 34109

New Mailing Address:

FEI Number: 20-1837794 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

INCORPORATE USA, INC.
3150 SANDY RIDGE DR
CLEARWATER, FL 34109 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

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: CIPOLLA, JOHN
Address: 2025 J & C BLVD # 5
City-St-Zip: NAPLES, FL 34109

Title: V ( ) Delete
Name: CIPOLLA, KRISTIN
Address: 2025 J & C BLVD # 5
City-St-Zip: NAPLES, FL 34109

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: CIPOLLA, KRISTIN
Address: 2025 J & C BLVD # 5
City-St-Zip: NAPLES, FL 34109

Title: V (X) Change ( ) Addition
Name: HELLER, NICOLE
Address: 2025 J & C BLVD # 5
City-St-Zip: NAPLES, FL 34109

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: KRISTIN CIPOLLA P 11/13/2007

Electronic Signature of Signing Officer or Director Date