2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Apr 11, 2007 8:00 am Secretary of State 04-11-2007 90034 034 ***150.00

| DOCUMENT # P05000031322 1. Entity Name JOHN JAMERSON CONSTRUCTION, INC. | | | | | | 04-11-200 | 7 90034 01 | 34 ***150 | 0.00 |
|--|--|---|---|-------------------|---|---------------------------|-------------------------------------|---------------------------------|-------------------------------------|
| Principal Place | of Rusinges | Mailing Address | | | 4. | TOODOD | . 1 | | |
| 4206 NW 21 GAINESVILLE, | TERRACE | 4206 NW 21 TERRACE Gainesville, FL 3260 |)5 | | | | | | |
| | | | | | | ICIDI OMILI MUMILI MUMILI | ES EIL ESES (1151 III | | |
| 2. Principal Pla | ace of Business - No P.O. Box # | 3. Mailing Address | | | | | | | |
| Suite, Apt. # | #, etc. | Suite, Apt. #, etc. | 3451 | #5 | 04092007 | Chg-P | CR2E0 | 34 (12/06) | |
| City & State | 3 | City & State CAMES VILLE | Fl | | 4. FEI Numbe 20-2294 | | | → | optied For |
| Zip | Country | Zip | Country | | 1 | of Status Desired | ± 🗆 | \$8.75 Add | ot Applicable ditional |
| | 6 Name and Address of Comm | 3200 | | | | | | Fee Require | rd |
| | 6. Name and Address of Curren | it wedisteled Agent | Nam | | /. Name and | Address of New | v Registered / | Agent | |
| JAMERSON, JOHN | | | | | | | | | |
| 4206 NW 21 TERRACE | | | Stree | et Address (| P.O. Box Numbe | r is Not Accepta | ıble) | | |
| GAINESVIL | LLE, FL 32605 | | | | | | | | |
| | | | City | | | | | Zip Cod | le |
| | | | 1 1 | | | | FL | • " | _ |
| 8. The above r | namey entity submits this statement | for the purpose of changing its | registered offici | e or register | ou agont, or oon | | | | |
| SIGNATURE | named entity submits this statement ons of registered agent. Signal of 1955 or printed name of unsuand agent | 2000 | registered offici | | | 4 | 10 O | <u> </u> | |
| SIGNATURE | ons of registered agent. | fi and title if applicable. (NOTE | E: Registered Agent si | ignature required | | 4 | 10 DATE | <u> </u> | |
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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:

QNAZZARE AND TYPED OR PRINTED HAME OF HIGHING OFFICER OR DIRECTOR