

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000043812

Entity Name: JJS CONTRACTING, INC.

FILED
Apr 12, 2007
Secretary of State

Current Principal Place of Business:

25 ETHAN ALLEN DR.
PALM COAST, FL 32164

New Principal Place of Business:

583 SE 37TH TERRACE
OKEECHOBEE, FL 34974

Current Mailing Address:

25 ETHAN ALLEN DR.
PALMCOAST, FL 32164

New Mailing Address:

583 SE 37TH TERRACE
OKEECHOBEE, FL 34974

FEI Number: 61-1485565

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KNIGHT, JERRY C
4721 E. MOODY BLVD.
BLDG. #5, SUITES 505& 506
BUNNELL, FL 32110 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: PSTD () Delete
Name: SHANNON, JEREMIAH J
Address: 25 ETHAN ALLEN
City-St-Zip: PALM COAST, FL 32164

Title: PSTD (X) Delete
Name: SHANNON, JEREMIAH J
Address: 25 ETHAN ALLEN DR.
City-St-Zip: PALM COAST, FL 32164

Title: PSTD (X) Delete
Name: SHANNON, JEREMIAH J
Address: 25 ETHAN ALLEN DR.
City-St-Zip: PALM COAST, FL 32164

Title: PSTD (X) Delete
Name: SHANNON, JEREMIAH J
Address: ETHAN ALLEN DR.
City-St-Zip: PALM COAST, FL 32164

Title: PSTD (X) Delete
Name: SHANNON, JEREMIAH J
Address: ETHAN ALLEN DR.
City-St-Zip: PALM COAST, FL 32164

Title: PSTD (X) Delete
Name: SHANNON, JEREMIAH J
Address: ETHAN ALLEN DR.
City-St-Zip: PALM COAST, FL 32164

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: SHANNON, JEREMIAH J
Address: 583 SE 37TH TERRACE
City-St-Zip: OKEECHOBEE, FL 34974

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: JEREMIAH J SHANNON

PSTD

04/12/2007

Electronic Signature of Signing Officer or Director

Date