

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000044284

Entity Name: JAKSSUB, INC.

FILED
Apr 16, 2007
Secretary of State

Current Principal Place of Business:

34940 EMERALD COAST PARKWAY
#188
DESTIN, FL 32451

New Principal Place of Business:

Current Mailing Address:

4551 SOUTH CAROTHERS ROAD
FRANKLIN, TN 37064

New Mailing Address:

FEI Number: 20-2553427

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCORMICK, JERRY
1253 AIRPORT ROAD
DESTIN, FL 32451 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: DIR () Delete
Name: LAMON, DAVID
Address: 65 HIDDEN HARBOR LANE
City-St-Zip: DESTIN, FL 32550

Title: S () Delete
Name: LAMON, STACY
Address: 65 HIDDEN HARBOR LANE
City-St-Zip: DESTIN, FL 32550

Title: DIR () Delete
Name: CRAWFORD, DAVID
Address: 1431 HAMILTON HILL DR
City-St-Zip: CORDOVA, TN 38016

Title: DIR () Delete
Name: CRAWFORD, KELLY
Address: 1431 HAMILTON HILL DR.
City-St-Zip: CORDOVA, TN 38016

Title: P () Delete
Name: MCCORMICK, JERRY
Address: 4551 SOUTH CAROTHERS ROAD
City-St-Zip: FRANKLIN, TN 37064

Title: DIR () Delete
Name: MCCORMICK, MICHAEL
Address: 4551 SOUTH CAROTHERS ROAD
City-St-Zip: FRANKLIN, TN 37064

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
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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: JERRY MCCORMICK

P

04/16/2007

Electronic Signature of Signing Officer or Director

Date