

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000053749

Entity Name: J MOON & ASSOCIATES, INC.

FILED
Jan 20, 2006
Secretary of State

Current Principal Place of Business:

2900 14TH STREET NORTH
SUITE 19
NAPLES, FL 34103

New Principal Place of Business:

Current Mailing Address:

2900 14TH STREET NORTH
SUITE 19
NAPLES, FL 34103

New Mailing Address:

FEI Number: 59-3635117

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOON, JAMES
2900 14TH STREET NORTH
SUITE 19
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

MOON, JAMES E
2900 14TH STREET NORTH
SUITE 19
NAPLES, FL 34103 US

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: JAMES E MOON

01/20/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MOON, JAMES
Address: P.O. BOX 11444
City-St-Zip: NAPLES, FL 34101

Title: VP () Delete
Name: MOON, JAMES
Address: P.O. BOX 11444
City-St-Zip: NAPLES, FL 34101

Title: T () Delete
Name: MOON, JAMES
Address: P.O. BOX 11444
City-St-Zip: NAPLES, FL 34101

Title: S () Delete
Name: MOON, JAMES
Address: P.O. BOX 11444
City-St-Zip: NAPLES, FL 34101

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MOON, JAMES E
Address: P.O. BOX 11444
City-St-Zip: NAPLES, FL 34101

Title: VP (X) Change () Addition
Name: MOON, JAMES E
Address: P.O. BOX 11444
City-St-Zip: NAPLES, FL 34101

Title: T (X) Change () Addition
Name: MOON, JAMES E
Address: P.O. BOX 11444
City-St-Zip: NAPLES, FL 34101

Title: S (X) Change () Addition
Name: MOON, JAMES E
Address: P.O. BOX 11444
City-St-Zip: NAPLES, FL 34101

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: JAMES E MOON

P

01/20/2006

Electronic Signature of Signing Officer or Director

Date