

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000054227

FILED
Apr 30, 2007
Secretary of State

Entity Name: FAILURE TURNED INTO SUCCESS INCORPORATED.

Current Principal Place of Business:

2211 OLUSTEE ST
JACKSONVILLE, FL 32209

New Principal Place of Business:

6337 MONCRIEF RD W
JACKSONVILLE, FL 32219

Current Mailing Address:

P.O. BOX 28937
JACKSONVILLE, FL 32226

New Mailing Address:

6337 MONCRIEF RD W
JACKSONVILLE, FL 32219

FEI Number: 20-2608346

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JONES, CLAUDE A
2211 OLUSTEE STREET
JACKSONVILLE, FL 32209 US

Name and Address of New Registered Agent:

JONES, CLAUDE A
6337 MONCRIEF RD W
JACKSONVILLE, FL 32219 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:

04/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: JONES, CLAUDE A
Address: 2211 OLUSTEE ST
City-St-Zip: JACKSONVILLE, FL 32209

Title: VPAS () Delete
Name: JORDAN, THEODORE L
Address: 1975 JORDAN ST
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: JONES, CLAUDE A
Address: 6337 MONCRIEF RD W
City-St-Zip: JACKSONVILLE, FL 32219

Title: VPAT (X) Change () Addition
Name: GREY, ISSAC
Address: 6337 MONCRIEF RD W
City-St-Zip: JACKSONVILLE, FL 32219

Title: AT () Change (X) Addition
Name: JORDAN, THEODORE L
Address: 6337 MONCRIEF RD W
City-St-Zip: JACKSONVILLE, FL 32219

Title: AS () Change (X) Addition
Name: BOONE, BARABRA
Address: 6337 MONCRIEF RD W
City-St-Zip: JACKSONVILLE, FL 32219

Title: CHAP () Change (X) Addition
Name: MCCARROL, SUZIE
Address: 6337 MONCRIEF RD W
City-St-Zip: JACKSONVILLE, FL 32219

Title: AS () Change (X) Addition
Name: WHITE, LYNN
Address: 6337 MONCRIEF RD
City-St-Zip: JACKSONVILLE, FL 32219

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: CLAUDE A JONES

PRES

04/30/2007

Electronic Signature of Signing Officer or Director

Date