

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 01, 2006 8:00 am**  
**Secretary of State**

05-01-2006 90448 048 \*\*\*150.00

**DOCUMENT # P05000058514**

1. Entity Name  
**JEANNIE C. REILLY REPORTING, INC.**



Principal Place of Business  
**10881 KNOTTINGBY DRIVE  
JACKSONVILLE, FL 32257 US**

Mailing Address  
**10881 KNOTTINGBY DRIVE  
JACKSONVILLE, FL 32257 US**

**60031477**



2. Principal Place of Business  
**2363 EAGLE HARBOR PKWY**  
Suite, Apt. #, etc.

3. Mailing Address  
**2363 EAGLE HARBOR PKWY**  
Suite, Apt. #, etc.

04122006 Chg-P CR2E034 (11/05)

City & State  
**ORANGE PARK, FL.**

City & State  
**ORANGE PARK, FL.**

4. FEI Number  
**20-2725197**

Applied For  
Not Applicable

Zip  
**32003** Country  
**US**

Zip  
**32003** Country  
**US**

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**REILLY, JEANNIE  
10881 KNOTTINGBY DRIVE  
JACKSONVILLE, FL 32257**

7. Name and Address of New Registered Agent

Name  
**REILLY, JEANNIE**

Street Address (P.O. Box Number is Not Acceptable)

**2363 EAGLE HARBOR PKWY**

City **ORANGE PARK** **FL** Zip Code **32003**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Jeannie Reilly* **JEANNIE REILLY, PRESIDENT** **4/28/06**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PSD  
REILLY, JEANNIE C  
10881 KNOTTINGBY DRIVE  
JACKSONVILLE, FL 32257** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VPTD  
REILLY, CHARLES J  
10881 KNOTTINGBY DRIVE  
JACKSONVILLE, FL 32257** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☒ Change ☐ Addition  
**2363 EAGLE HARBOR PKWY.  
ORANGE PARK, FL 32003**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☒ Change ☐ Addition  
**2363 EAGLE HARBOR PKWY  
ORANGE PARK, FL. 32003**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Jeannie Reilly* **JEANNIE REILLY, PRESIDENT** **4/28/06** **904-910-7270**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #