


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2008 08:00 AM
Secretary of State

DOCUMENT # P05000059917
 1. Entity Name
 J & J PEANUT, INC



Principal Place of Business
 4451 NW 160TH STREET
 TRENTON, FL 32693

Mailing Address
 4451 NW 160TH STREET
 TRENTON, FL 32693

DO NOT WRITE IN THIS SPACE



02052008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-2730620	Applied For Not Applicable
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5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JORDAN, MERLE
 4451 NW 160TH STREET
 TRENTON, FL 32693

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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 _____
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, 2008 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	P JORDAN, MERLE 4451 NW 160TH STREET TRENTON, FL 32693
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP JORDAN, ROBERT 4451 NW 160TH STREET TRENTON, FL 32693
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JORDAN, ANITA LYNN 4451 NW 160TH ST TRENTON, FL 32693
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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:  2-5-08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #