

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000071002

Entity Name: INSTALLERS OF JAX, INC

FILED  
May 09, 2006  
Secretary of State

## Current Principal Place of Business:

131 WAMSLEY ROAD  
JACKSONVILLE, FL 32254

## New Principal Place of Business:

11127 OGALLA AVE  
JACKSONVILLE, FL 32219

## Current Mailing Address:

PO BOX 16952  
JACKSONVILLE, FL 32245

## New Mailing Address:

11127 OGALLA AVE  
JACKSONVILLE, FL 32219

FEI Number: 20-2841133

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KOLBE, MILES A  
131 WAMSLEY ROAD  
JACKSONVILLE, FL 32254 US

## Name and Address of New Registered Agent:

KOLBE, MILES A  
11127 OGALLA AVE  
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: MILES A KOLBE

05/09/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: KOLBE, MILES A  
Address: 131 WAMSLEY ROAD  
City-St-Zip: JACKSONVILLE, FL 32254

Title: VP ( ) Delete  
Name: LEWANDOWSKI, JOHN  
Address: 1175 ET 18TH STREET  
City-St-Zip: JACKSONVILLE, FL 32206

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: KOLBE, MILES A  
Address: 11127 OGALLA AVE  
City-St-Zip: JACKSONVILLE, FL 32219

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: MILES A KOLBE

P

05/09/2006

Electronic Signature of Signing Officer or Director

Date