

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000091776

Entity Name: JMT MANAGEMENT CORP.

FILED
Apr 22, 2009
Secretary of State

Current Principal Place of Business:

5601 CORPORATE WAY
210
WEST PALM BEACH, FL 33407

New Principal Place of Business:

Current Mailing Address:

5601 CORPORATE WAY
210
WEST PALM BEACH, FL 33407

New Mailing Address:

FEI Number: 20-3050104

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MICKLE, JAMIE
5601 CORPORATE WAY
210
WEST PALM BEACH, FL 33407 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MICKLE, JAMIE
Address: 3096 EL CAMINO REAL
City-St-Zip: WEST PALM BEACH, FL 33409

Title: VPST () Delete
Name: DENTRY, DEBORAH A
Address: 465 ORRICK LANE
City-St-Zip: GREENEVILLE, TN 37743

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: MCNEAL, CLYDE O
Address: 5601 CORPORATE WAY #210
City-St-Zip: WEST PALM BEACH, FL 33407

Title: VP () Change (X) Addition
Name: SAMONS, ROBERT
Address: 5601 CORPORATE WAY #210
City-St-Zip: WEST PALM BEACH, FL 33407

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: DEBORAH A DENTRY

VP

04/22/2009

Electronic Signature of Signing Officer or Director

Date