

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000117065

Entity Name: JOB OPPS, INC.

FILED  
Mar 29, 2006  
Secretary of State

## Current Principal Place of Business:

3911 NE 21ST LANE  
OCALA, FL 34470

## New Principal Place of Business:

2701 NE 10TH STREET #103  
OCALA, FL 34470

## Current Mailing Address:

3911 NE 21ST LANE  
OCALA, FL 34470

## New Mailing Address:

P. O. BOX 5255  
OCALA, FL 34478

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GIBBONEY, H S III  
3911 NE 21ST LANE  
OCALA, FL 34470 US

## Name and Address of New Registered Agent:

GIBBONEY, H S III  
2701 NE 10TH STREET #103  
OCALA, FL 34470 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: H. S. GIBBONEY III

03/29/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: GIBBONEY, H S III  
Address: 3911 NE 21ST LANE  
City-St-Zip: Ocala, FL 34470

Title: VPD ( ) Delete  
Name: VANDEVEN, HARVEY  
Address: 4260 NE 35TH STREET  
City-St-Zip: Ocala, FL 34479

Title: SD ( ) Delete  
Name: GAMBLE, JERONE  
Address: PO BOX 1388  
City-St-Zip: Ocala, FL 34478

Title: TD ( ) Delete  
Name: GONZALEZ, LOLA M  
Address: 108 N MAGNOLIA AVE, STE 202  
City-St-Zip: Ocala, FL 34475

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: GIBBONEY, H S III  
Address: 2701 NE 10TH STREET #103  
City-St-Zip: Ocala, FL 34470

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

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

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: H. S. GIBBONEY III

PD

03/29/2006

Electronic Signature of Signing Officer or Director

Date