

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000119449

Entity Name: JEA SOLUTIONS INC.

FILED
Apr 12, 2007
Secretary of State

Current Principal Place of Business:

9990 MEDALLION BLUFF LANE
ORLANDO, FL 32829 US

New Principal Place of Business:

1139 HIDDEN RIDGE
APT 1135
IRVING, TX 75038 US

Current Mailing Address:

9990 MEDALLION BLUFF LANE
ORLANDO, FL 32829 US

New Mailing Address:

1139 HIDDEN RIDGE
APT 1135
IRVING, TX 75038 US

FEI Number: 32-0157139

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JETTY, MADHUSUDANA R
9990 MEDALLION BLUFF LANE
ORLANDO, FL 32829 US

Name and Address of New Registered Agent:

A.A. ALI, CPA
1322 N. PINE HILLS RD.
ORLANDO, FL 32808 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: A.A. ALI, CPA

04/12/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JETTY, MADHUSUDANA R
Address: 9990 MEDALLION BLUFF LANE
City-St-Zip: ORLANDO, FL 32829 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JETTY, MADHUSUDANA R
Address: 1139 HIDDEN RIDGE
City-St-Zip: IRVING, TX 75038 US

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: MADHUSUDANA JETTY

PRES

04/12/2007

Electronic Signature of Signing Officer or Director

Date