


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 19, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P05000130454</b> 1. Entity Name JNJ MECHANICAL INC.	
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Principal Place of Business 5318 CORONET DRIVE JACKSONVILLE, FL 32205	Mailing Address 5318 CORONET DRIVE JACKSONVILLE, FL 32205
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**DO NOT WRITE IN THIS SPACE**



01232007 No Chg-P CR2E034 (11/05)

4. FEI Number 02-0753124	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  HORNBERGER, JAY E 5318 CORONET DRIVE JACKSONVILLE, FL 32205
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**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HORNBERGER, JAY E 5318 CORONET DRIVE JACKSONVILLE, FL 32205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V NELSON, JOHN 2136 BAYVIEW ROAD JACKSONVILLE, FL 32210
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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02/28/07-80067-009 150.00

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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: Jay Hornberger 2/16/07 904 318 8904  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #