

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000162455

Entity Name: JB&B MANAGMENT CORP.

FILED
Apr 30, 2006
Secretary of State

Current Principal Place of Business:

390 NEWFOUND HARBOR DR
MERRITT ISLAND, FL 32952

New Principal Place of Business:

Current Mailing Address:

390 NEWFOUND HARBOR DR
MERRITT ISLAND, FL 32952

New Mailing Address:

FEI Number: 20-3953304

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JEFFERS, JAMES A
390 NEWFOUND HARBOR
MERRITT ISLAND, FL 32952 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: PRES () Delete
Name: JEFFERS, JAMES A
Address: 390 NEWFOUND HARBOR DR
City-St-Zip: MERRITT ISLAND, FL 32952

Title: TRES () Delete
Name: TERREBONNE, BRIAN A
Address: 390 NEWFOUND HARBOR DR
City-St-Zip: MERRITT ISLAND, FL 32952

Title: VP () Delete
Name: SHAFFER, BARRY R
Address: 72 E MERRITT ISLAND CSWY
City-St-Zip: MERRITT ISLAND, FL 32952

Title: SEC () Delete
Name: TERREBONE, BRIAN A
Address: 390 NEWFOUND HARBOR DR
City-St-Zip: MERRITT ISLAND, FL 32952

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

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

Title: DIR () Change (X) Addition
Name: MUNSON, LAURA DIR
Address: 142 N ATLANTIC AVE
City-St-Zip: COCOA BEACH, FL 32931

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: JAMES JEFFERS

PRES

04/30/2006

Electronic Signature of Signing Officer or Director

_____ Date