2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 14, 2008 08:00 Al Secretary of State

	ANNUAL		Apr 14, 2008 08:			
DOCUMENT # P06000023016 1. Entity Name J.W.'S CONSTRUCTION CONSULTANTS, INC.				Secretary of S		
Principal Plac 77 BREAM A OKEECHOBE		Mailing Address 77 BREAM AVE OKEECHOBEE, FL 34974		1 10 0 17 20 6 14 1 0 0 11	F 8// 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	
	•		:			R2E034 (11/05)
D	O NOT WRITE	IN THIS SPA	CE '	4. FEI Number 04-384605 5. Certificate of S		Applied For Not Applicable
	6. Name and Address of Current Re	oletered Agent	****	or continuate of a		Fee Required
WALTERS, JON C 2730 COZUMEL DR #1405 MELBOURNE, FL 32935					IOT WRI	
the obligate	named entity submits this statement for tions of registered agent. Signature, typed or printed name of registered agent and E NOWILL FEE IS \$150.00 BY 1, 2008 Fee will be \$550.00	Utte (I applicable. (NOTE: Registers 9. Election Campaign Fina	ad Agent signature required	d when reinstating)	0	ATE 5730 080-003 150.00
10.	OFFICERS AND DI	RECTORS			4 ,	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P WALTERS, JON C 2730 COZUMEL DR #1405 MELBOURNE, FL 32935					
TITLE NAME STREET ADDRESS CITY+ST-ZIP	SEC WALTERS, JEAN G 77 BREAM AVE OKEECHOBEE, FL 34974			3.		
TITLE MAME STREET ADDRESS CITY-ST-ZIP			·		OT WRI	• •
TITLE NAME STREET AODRESS CITY+ST-ZIP				IN TH	HIS SPAC	CE
TITLE NAME Street address City-St-Zip						
TITLE NAME - STREET ADDRESS	. • • • •		material by dark special			

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:

CHARLES AND THE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

863-763-9966