

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 14, 2008 8:00 am
Secretary of State

05-14-2008 90014 009 ***150.00

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1. Entity Name
JAMES GROUND WORKS, INC.

Principal Place of Business
**4927 MYAKKA VALLEY TRAIL
SARASOTA, FL 34241**

Mailing Address
**4927 MYAKKA VALLEY TRAIL
SARASOTA, FL 34241**

DO NOT WRITE IN THIS SPACE



03102008 No Chg-P CR2E034 (11/05)

4. FEI Number
20-4452128

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**JAMES, GARY SR.
4927 MYAKKA VALLEY TRAIL
SARASOTA, FL 34241**

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	JAMES, GARY SR.
STREET ADDRESS	4927 MYAKKA VALLEY TRAIL
CITY - ST - ZIP	SARASOTA, FL 34241
TITLE	Treasurer
NAME	Brenda James
STREET ADDRESS	4927 Myakka Valley Tr
CITY - ST - ZIP	Sarasota, FL 34241
TITLE	Vice President
NAME	Gary L James JR
STREET ADDRESS	4927 Myakka Valley Tr
CITY - ST - ZIP	Sarasota FL 34241
TITLE	Vice President
NAME	Christopher James
STREET ADDRESS	4927 Myakka Valley Tr
CITY - ST - ZIP	Sarasota, FL 34241
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: Brenda James Brenda James 4/23/08 941-809-8494

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #