

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 11, 2007 8:00 am
Secretary of State


05-11-2007 90021 049 ***158.75

DOCUMENT # P06000033482	
1. Entity Name JH SUCCESSFUL DEVELOPMENT INC	

Principal Place of Business PO BOX 49214 SARASOTA, FL 34230	Mailing Address PO BOX 49214 SARASOTA, FL 34230
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2. Principal Place of Business - No P.O. Box # 2707 93rd Court East	3. Mailing Address P.O. Box 49214
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Palmetto, FL	City & State Sarasota, FL
Zip 34221	Country Manatee
Zip 34230	Country Sarasota

	
04262007	Chg-P CR2E034 (12/06)
4. FEI Number 20-8799062	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent FELTON, JANELL 1579 28TH STREET SARASOTA, FL 34234
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7. Name and Address of New Registered Agent Name Janell Haugabook Street Address (P.O. Box Number is Not Acceptable) 2707 93rd Court East City Palmetto, FL Zip Code 34221

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 Janell Haugabook DATE 4/21/07

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

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FELTON, JANELL PO BOX 49214 SARASOTA, FL 34230 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Haugabook, Janell PO Box 49214 Sarasota, FL 34230 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: Janell Haugabook, President 4/21/07