

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000059391

Entity Name: JSVOBODA INC.

FILED
Apr 15, 2009
Secretary of State

Current Principal Place of Business:

4000 LOBLOLLY BAY DR. #201
NAPLES, FL 34114 US

Current Mailing Address:

4000 LOBLOLLY BAY DR. #201
NAPLES, FL 34114 US

New Principal Place of Business:

1155 SARAH JEAN CIR.
E103
NAPLES, FL 34110 US

New Mailing Address:

1155 SARAH JEAN CIR.
E103
NAPLES, FL 34110 US

FEI Number: 20-4762441

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SVOBODA, JOHN H III
757 LAKE BETTY DR
LAKE PLACID, FL 33852 US

Name and Address of New Registered Agent:

SVOBODA, JOHN H III
1155 SARAH JEAN CIR.
E103
NAPLES, FL 34110 US

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:

04/15/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTS () Delete
Name: SVOBODA, JOHN H III
Address: 757 LAKE BETTY DR.
City-St-Zip: LAKE PLACID, FL 33852 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTS (X) Change () Addition
Name: SVOBODA, JOHN H III
Address: 1155 SARAH JEAN CIR. APT. E103
City-St-Zip: NAPLES, FL 34110 US

I hereby certify that the information supplied with this filing does not qualify 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: JOHN SVOBODA

PTS

04/15/2009

Electronic Signature of Signing Officer or Director

Date