## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000062271

Entity Name: JDS CAPITAL, INC

FILED Feb 21, 2007 Secretary of State

		117.C, 1140.				
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
	ANGE AVENU , FL 3280133					
Current Mailing Address:			New Mailing Address:			
450 S. ORANGE AVENUE ORLANDO, FL 328013336			PO BOX 4920 ORLANDO, FL 32802			
FEI Number:	35-2272850	FEI Number Applied For()	FEI Number Not App	Certificate of Status Desired ( )		
Name and	Address of C	Current Registered Agent:	Name and	Address of New Registered Agent:		
450 S. ORA	LI, LINDA A ANGE AVENU , FL 3280133					
The above in the State		submits this statement for the pu	rpose of changing i	its registered office or registered agent, or both,		
SIGNATUR	RE:					
	Electror	nic Signature of Registered Agen	t	Date		
Election Can	npaign Financin	g Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D ( ) SENEFF, JR., , 450 S. ORANG ORLANDO, FL	E AVENUE	Title: Name: Address: City-St-Zip:	DPCE (X) Change ( ) Addition SENEFF, JR., JAMES M 450 S. ORANGE AVENUE ORLANDO, FL 328013336		
Title: Name: Address: City-St-Zip:	( )	) Delete	Title: Name: Address: City-St-Zip:	S ( ) Change (X) Addition MANOR, TIMOTHY J 450 S. ORANGE AVENUE ORLANDO, FL 32801		
Title: Name: Address: City-St-Zip:	( )	) Delete	Title: Name: Address: City-St-Zip:	T ( ) Change (X) Addition SCHMIDT, TRACY G 450 S. ORANGE AVENUE ORLANDO, FL 32801		
Title: Name: Address: City-St-Zip:	( )	) Delete	Title: Name: Address: City-St-Zip:	DVC ( ) Change (X) Addition SENEFF, DAYLE L 450 S. ORANGE AVENUE ORLANDO, FL 32801		
Title: Name: Address: City-St-Zip:		) Delete	Title: Name: Address: City-St-Zip:	S ( ) Change (X) Addition SCIMECA, MARK D 450 S. ORANGE AVENUE ORLANDO, FL 32801		

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: MARK D. SCIMECA S 02/21/2007