

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-16-2007 90079 015 ***150.00

2007 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P06000078863			
1. Entity Name JLW PROPERTIES, INC.			
Principal Place of Business 922 LAKERIDGE DR ORANGE PARK, FL 32065		Mailing Address 922 LAKERIDGE DR ORANGE PARK, FL 32065	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 83-048-1557		Applied For ☒ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WORKMAN, JAN L 922 LAKERIDGE DR ORANGE PARK, FL 32065		7. Name and Address of New Registered Agent Name: JAN L. WORKMAN Street Address (P.O. Box Number is Not Acceptable) 922 LakeRidge Drive City: Orange Park, FL Zip Code: 32065	
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: <u>Jan L Workman</u> DATE: <u>4-10-07</u> 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. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PS WORKMAN, JAN L 922 LAKERIDGE DR ORANGE PARK, FL 32065 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V WORKMAN, DANIEL P 922 LAKERIDGE DR ORANGE PARK, FL 32065 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Vice President / Treasurer Daniel P. Workman 219 Evergreen Lane Middleburg, Florida 32068 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T WEISKIRCHER, JOHN D 1120 PARK ST BOWLING GREEN, KY 42101 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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: <u>Jan L Workman</u>		Date: <u>4-10-07</u> (904) 711-3811	