2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000110305

Entity Name: GOT BAIL?, INC.

FILED May 09, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

12 N LIBERTY ST 339 E BAY ST

101 JACKSONVILLE, FL 32202

JACKSONVILLE, FL 32202

Current Mailing Address: New Mailing Address:

12 N LIBERTY ST 339 E BAY ST

SUITE#101 JACKSONVILLE, FL 32202 JACKSONVILLE, FL 32202

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NEELEY, TOMMY J
12 N LIBERTY ST
NEELEY, TOMMY J
339 E BAY ST

SUITE #101 JACKSONVILLE, FL 32202 US

JACKSONVILLE, FL 32202 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: TOMMY NEELEY 05/09/2008

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 NEELEY, TOMMY J
 Name:
 NEELEY, TOMMY J

 Address:
 12 N LIBERTY ST. SUITE 101
 Address:
 339 E BAY ST

City-St-Zip: JACKSONVILLE, FL 32202 City-St-Zip: JACKSONVILLE, FL 32202

 Name:
 RAYMER, BOBBY
 Name:
 RAYMER, BOBBY

 Address:
 12 N LIBERTY ST. SUITE 101
 Address:
 339 E BAY ST

City-St-Zip: JACKSONVILLE, FL 32202 City-St-Zip: JACKSONVILLE, FL 32202

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: TOMMY NEELEY PRES 05/09/2008