

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000133667

Entity Name: JACOME & ASSOCIATES, INC.

FILED
May 02, 2007
Secretary of State

Current Principal Place of Business:

5349 FORZLEY STREET
ORLANDO, FL 32812 US

New Principal Place of Business:

Current Mailing Address:

5349 FORZLEY STREET
ORLANDO, FL 32812 US

New Mailing Address:

FEI Number: 20-5742796

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JACOME, SUSAN W
5349 FORZLEY STREET
ORLANDO, FL 32812 US

Name and Address of New Registered Agent:

TURNER, SUSAN J
5349 FORZLEY STREET
ORLANDO, FL 32812 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: SUSAN JACOME TURNER

05/02/2007

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:

Title: P () Delete
Name: JACOME, SUSAN W
Address: 5349 FORZLEY STREET
City-St-Zip: ORLANDO, FL 32812 US

Title: VP () Delete
Name: KEIFFER, ELIZABETH
Address: 3613 EDLAND DRIVE
City-St-Zip: ORLANDO, FL 32812 US

Title: S () Delete
Name: WOOLEY, JUDITH A
Address: 3613 EDLAND DRIVE
City-St-Zip: ORLANDO, FL 32812 US

Title: T () Delete
Name: TURNER, WALTER J JR.
Address: 942 SOUTHRIDGE TRAIL
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TURNER, SUSAN J
Address: 5349 FORZLEY STREET
City-St-Zip: ORLANDO, FL 32812 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: SUSAN JACOME TURNER

P

05/02/2007

Electronic Signature of Signing Officer or Director

Date