

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000142348

FILED
Apr 30, 2008
Secretary of State

Entity Name: JNZ INSURANCE SERVICES INC

Current Principal Place of Business:

425 W.TOWN PLACE
SUITE #102
SAINT AUGUSTINE, FL 32092 US

New Principal Place of Business:

Current Mailing Address:

425 W.TOWN PLACE
SUITE #102
SAINT AUGUSTINE, FL 32092 US

New Mailing Address:

FEI Number: 20-5861805

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'CONNOR, RICK
425 W.TOWN PLACE
STE-102
SAINT AUGUSTINE, FL 32092 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: O'CONNOR, RICK
Address: 425 W.TOWN PLACE STE-102
City-St-Zip: SAINT AUGUSTINE, FL 32902

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: RICHARD C O CONNOR

P

04/30/2008

Electronic Signature of Signing Officer or Director

Date