

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000027042

Entity Name: JMT TRIM INC

FILED
Jun 08, 2009
Secretary of State

Current Principal Place of Business:

9305 TROUT LAKE ROAD
ORLANDO, FL 32818 US

New Principal Place of Business:

9205 TROUT LAKE ROAD
ORLANDO, FL 32818 US

Current Mailing Address:

9337 TROUT LAKE RD
ORLANDO, FL 32818 US

New Mailing Address:

9205 TROUT LAKE RD
ORLANDO, FL 32818 US

FEI Number: 33-1156158

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TURNER, JAMES M
9305 TROUT LAKE ROAD
ORLANDO, FL 32818 US

Name and Address of New Registered Agent:

TURNER, JAMES M
9205 TROUT LAKE ROAD
ORLANDO, FL 32818 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: JACQUELYN TURNER

06/08/2009

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: TURNER, JAMES M
Address: 9337 TROUT LAKE RD
City-St-Zip: ORLANDO, FL 32818 US

Title: SECR () Delete
Name: TURNER, JACQUELYN M
Address: 9337 TROUT LAKE RD
City-St-Zip: ORLANDO, FL 32818 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TURNER, JAMES M
Address: 9205 TROUT LAKE RD
City-St-Zip: ORLANDO, FL 32818 US

Title: SECR (X) Change () Addition
Name: TURNER, JACQUELYN M
Address: 9205 TROUT LAKE RD
City-St-Zip: ORLANDO, FL 32818 US

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: JAMES M TURNER

P

06/08/2009

Electronic Signature of Signing Officer or Director

Date