## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 21, 2008 8:00 am Secretary of State

DOCUMENT # P0700068393  1. Entity Name CHRISTOPHER JACKSON, ARCHITECT, PA						04-21-2008	90093 0	24 ***15	8.75
Principal Place	e of Business	Mailing Address			, ,				
15222 BLUE FISH CIRCLE BRADENTON, FL 34202		15222 BLUE FISH CIRCLE Bradenton, FL 34202		<i>t</i> 3 iurijust (30	BURN NUN KANA DUN BURN	: 90   E 11  01  E		E 01	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			04042008	Chg-P	CR2E0	34 (12/06)	
City & State		City & State			4. FEI Numb	36 - 03411	69	<u> </u>	plied For t Applicable
Zip	Country	Zip	Coun	try	5. Certificate	of Status Desired		\$8.75 Add Fee Required	
سني ،	-6. Name and Address of Current	Registered Agent_			7. Name and	Address of New R	egistered A	gent	
			Name						
JACKSON, CHRISTOPHER 15222 BLUE FISH CIRCLE BRADENTON, FL 34202			Street Address (P.O. Box Number is Not Acceptable)						
DIG (DERTO), 1 E 07202									
			City	FL Zip Code					
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									
FILE NOWIII FEE IS \$150.00  After May 1, 2008 Fee will be \$550.00  9. Election Campaign Finance Trust Fund Contribution.					5.00 May Be Ided to Fees				
10.	OFFICERS AND DIRECTORS 11.				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11				
TITLE	DPST Delete TITL		i				Change	☐ Addition	
name Street address			NAM	ET ADDRESS					l
CITY-ST-ZIP	· ·		-ST-ZIP						
TITLE	☐ Delete TITL						☐ Change	Addition	
NAME			NAM	i					
STREET ADDRESS				EET ADDRESS					
CITY-ST-ZIP				-ST-ZIP					
TITLE NAME		☐ Defete	TITLE				•	☐ Change	☐ Addition
STREET ADDRESS				EET ADDRESS					
CITY-ST-ZIP				-ST-ZIP					
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TITLE	☐ Delete TITLE							Change	☐ Addition
NAME			NAM	1				C. S. S. S. S.	
STREET ADDRESS				EET ADDRESS					
CITY-ST-ZIP			-	-ST-ZIP					<u></u> -
TITLE		☐ Delete	TITLE					Change	Addition
STREET ADDRESS			1	EET ADDRESS					
CITY-ST-ZIP			CITY	- ST - ZIP					
12 I hereby	certify that the information supplied wit	h this filing closs not qualify f	or the ev	emotions contains	od in Chapter 11	Florida Statutos I	further cert	ifu that the in	dormation

12. Thereby 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 suppliemental 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:

SIGNATURE AND THE PED OR PRINTED NAME OF SIGNING FICER OR DIRECTOR

April 14, 2008