


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 03, 2008 8:00 am**  
**Secretary of State**

03-03-2008 90200 044 \*\*\*158.75

<b>DOCUMENT # P07000077167</b>					
1. Entity Name JAYNE BROTHERS MANAGEMENT, INC.					
Principal Place of Business 918 HAMILTON PLACE LANE LAKELAND, FL 33813			Mailing Address 918 HAMILTON PLACE LANE LAKELAND, FL 33813		
2. Principal Place of Business - No P.O. Box # 4015 Holden Road		3. Mailing Address P.O. Box 2534			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Lakeland, FL		City & State Lakeland, FL		4. FEI Number 26-0534207	
Zip 33811 Country US		Zip 33806 Country US		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CHRITTON, CHARLES P 255 EAST LEMON STREET SUITE 351 LAKELAND, FL 33801			7. Name and Address of New Registered Agent Name Robert Aranda, Esquire Street Address (P.O. Box Numbers Not Acceptable) Valenti Campbell Tronn Tamayo & Aranda 1701 S. Florida Avenue City Lakeland FL Zip 33803		
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 <i>Robert Aranda</i> DATE <i>2/26/08</i> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition	
		P Eric P. Jayne, 4015 Holden Road Lakeland, FL 33811			
		V Jean M. Jayne, 4015 Holden Road Lakeland, FL 33811			
			<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
			<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
			<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
			<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
			<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
12. I hereby 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 supplemental 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: <i>Jean M. Jayne</i>		Date: <i>2/27/08</i> Daytime Phone #: <i>8636484880</i>			
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					