2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2010
Secretary of State

DOCUMENT# P07000105795

Entity Name: CLAIM JUMPER, INC.

Current Principal Place of Business:

905 SOUTHEAST 29TH STREET
CAPE CORAL, FL 33904

New Principal Place of Business:

Current Mailing Address:

905 SOUTHEAST 29TH STREET
CAPE CORAL, FL 33904

New Mailing Address:

FEI Number: 41-2253002 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WEEKS, KEEGAN G
905 SOUTHEAST 29TH STREET
CAPE CORAL, FL 33904 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
Name: WEEKS, KEEGAN G
Address: 905 SOUTHEAST 29TH STREET
City-St-Zip: CAPE CORAL, FL 33904

Title: V
Name: CARTER, ROBERT
Address: 13488 LITTLE GEM CIR
City-St-Zip: FORT MYERS, FL 33913

Title: S
Name: CARTER, MELISSA
Address: 13488 LITTLE GEM CIR
City-St-Zip: FORT MYERS, FL 33913

Title: T
Name: WILLIAMS, ERICA
Address: 905 SOUTHEAST 29TH STREET
City-St-Zip: CAPE CORAL, FL 33904

I hereby 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 all other like empowered.

SIGNATURE: KEEGAN WEEKS PRES 04/16/2010

Electronic Signature of Signing Officer or Director — Date