2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000010802

Entity Name: THE HOUSE THAT JACK BUILT OF PC, INC.

FILED Apr 25, 2008 Secretary of State

Current Mailing Address: New Mailing Address: 1502 EAST 40TH PLACE LYNN HAVEN, FL 32444 FEI Number: 59-3165155 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WHETSTINE, JACQUELINE M 1502 EAST 40TH PLACE LYNN HAVEN, FL 32444 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, of in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Electronic Signature of Registered Agent Date Electronic Signature of Registered Agent Date Title: P () Delete Name: WHETSTINE, JACK Name: WHETSTINE, JACK Name: WHETSTINE, JACK Name: WHETSTINE, JACK Name: WHETSTINE, JACQUELINE M. Name: Address: City-St-Zip: LYNN HAVEN, FL Title: VP () Delete Title: () Change () Addition Name: Address: City-St-Zip: LYNN HAVEN, FL Title: VP () Delete Title: () Change () Addition Name: Address: City-St-Zip: LYNN HAVEN, FL Title: VP () Delete Title: () Change () Addition Name: Address: Address: City-St-Zip: LYNN HAVEN, FL		•	e of Business:	New Principal Place	OI Dusilless:
1502 EAST 40TH PLACE LYNN HAVEN, FL 32444 FEI Number: 59-3165155 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired Name and Address of Current Registered Agent: WHETSTINE, JACQUELINE M 1502 EAST 40TH PLACE LYNN HAVEN, FL 32444 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: P () Delete Title: () Change () Addition Name: WHETSTINE, JACK Address: City-St-Zip: LYNN HAVEN, FL City-St-Zip: Title: S () Delete Title: () Change () Addition Name: WHETSTINE, JACQUELINE M. Name: WHETSTINE, JACQUELINE					
FEI Number: 59-3165155 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired Name and Address of Current Registered Agent: WHETSTINE, JACQUELINE M 1502 EAST 40TH PLACE LYNN HAVEN, FL 32444 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date	Current Mailing Address:			New Mailing Address:	
Name and Address of Current Registered Agent: WHETSTINE, JACQUELINE M 1502 EAST 40TH PLACE LYNN HAVEN, FL 32444 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date					
WHETSTINE, JACQUELINE M 1502 EAST 40TH PLACE LYNN HAVEN, FL 32444 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date	El Number:	59-3165155	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
1502 EAST 40TH PLACE LYNN HAVEN, FL 32444 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date	lame and	Address of C	Current Registered Agent:	Name and Address o	f New Registered Agent:
The above named entity submits this statement for the purpose of changing its registered office or registered agent, of in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date					
The above named entity submits this statement for the purpose of changing its registered office or registered agent, of in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent					
in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: P () Delete Name: WHETSTINE, JACK Address: 1502 E 40TH PLACE City-St-Zip: LYNN HAVEN, FL Title: S () Delete Title: () Change () Addition Name: WHETSTINE, JACQUELINE M. Name: WHETSTINE, JACQUELINE M. Address: 1502 E 40TH PLACE City-St-Zip: LYNN HAVEN, FL Title: VHETSTINE, JACQUELINE M. Address: 1502 E 40TH PLACE City-St-Zip: LYNN HAVEN, FL Title: VP () Delete Title: () Change () Addition Name: WHETSTINE, JACQUELINE M. Name:	he ahove i	named entity	submits this statement for the		
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS: Title: P () Delete Name: WHETSTINE, JACK Address: 1502 E 40TH PLACE City-St-Zip: LYNN HAVEN, FL Title: S () Delete Name: WHETSTINE, JACQUELINE M. Address: 1502 E 40TH PLACE City-St-Zip: LYNN HAVEN, FL Title: S () Delete Name: WHETSTINE, JACQUELINE M. Address: 1502 E 40TH PLACE City-St-Zip: LYNN HAVEN, FL Title: WHETSTINE, JACQUELINE M. Address: 1502 E 40TH PLACE City-St-Zip: LYNN HAVEN, FL Title: VP () Delete Name: WHETSTINE, JACQUELINE M. Title: VP () Delete Name: WHETSTINE, JACQUELINE M. Title: VP () Delete Name: WHETSTINE, JACQUELINE M. Title: VP () Delete Name: WHETSTINE, JACQUELINE M. Title: VP () Delete Name: WHETSTINE, JACQUELINE M.					d attica ar registered agent, ar bath
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS: Title: P () Delete Name: WHETSTINE, JACK Address: 1502 E 40TH PLACE City-St-Zip: LYNN HAVEN, FL Title: S () Delete Name: WHETSTINE, JACQUELINE M. Address: 1502 E 40TH PLACE City-St-Zip: LYNN HAVEN, FL Title: S () Delete Name: WHETSTINE, JACQUELINE M. Address: 1502 E 40TH PLACE City-St-Zip: LYNN HAVEN, FL Title: WHETSTINE, JACQUELINE M. Address: 1502 E 40TH PLACE City-St-Zip: LYNN HAVEN, FL Title: VP () Delete Name: WHETSTINE, JACQUELINE M. Title: VP () Delete Name: WHETSTINE, JACQUELINE M. Title: VP () Delete Name: WHETSTINE, JACQUELINE M. Title: VP () Delete Name: WHETSTINE, JACQUELINE M. Title: VP () Delete Name: WHETSTINE, JACQUELINE M.	i the State		submits this statement for the	purpose of changing its registered	d office or registered agent, or both,
OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: P () Delete Title: () Change () Addition Name: WHETSTINE, JACK Name: Address: 1502 E 40TH PLACE Address: City-St-Zip: LYNN HAVEN, FL City-St-Zip: Title: S () Delete Title: () Change () Addition Name: WHETSTINE, JACQUELINE M. Name: Address: 1502 E 40TH PLACE Address: City-St-Zip: LYNN HAVEN, FL City-St-Zip: LYNN HAVEN, FL Title: WP () Delete Title: () Change () Addition Name: WHETSTINE, JACQUELINE M. Name: WHETSTINE, JACQUELINE M. Name:		of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,
Title: P () Delete Title: () Change () Addition Name: WHETSTINE, JACK Name: Address: City-St-Zip: LYNN HAVEN, FL Address: City-St-Zip: Title: S () Delete Title: () Change () Addition Name: WHETSTINE, JACQUELINE M. Name: Address: 1502 E 40TH PLACE Address: City-St-Zip: LYNN HAVEN, FL City-St-Zip: Title: VP () Delete Title: () Change () Addition Name: WHETSTINE, JACQUELINE M Name:		of Florida. RE:			
Name: WHETSTINE, JACK Name: Address: 1502 E 40TH PLACE Address: City-St-Zip: City-St-Zip: Title: S () Delete Title: Name: WHETSTINE, JACQUELINE M. Name: Address: City-St-Zip: LYNN HAVEN, FL City-St-Zip: Title: VP () Delete Title: Name: WHETSTINE, JACQUELINE M. Name: () Change () Addition Name:	SIGNATUR	of Florida. RE:Electror	nic Signature of Registered Ag		
Address: City-St-Zip: Title: Name: VP () Delete Title: VP () Delete Name: VHETSTINE, JACQUELINE M. Title: VP () Delete Name: VHETSTINE, JACQUELINE M. Title: Name: VP () Delete Title: Name: Name: Name: Name: VP () Delete Name: Name: Name: VP () Delete Name: Name	SIGNATUR	of Florida. EE: Electror paign Financing	nic Signature of Registered Agg	gent	Date
City-St-Zip: LYNN HAVEN, FL City-St-Zip: Title: S () Delete Title: () Change () Addition Name: WHETSTINE, JACQUELINE M. Address: 1502 E 40TH PLACE Address: City-St-Zip: LYNN HAVEN, FL Title: VP () Delete Title: () Change () Addition Name: WHETSTINE, JACQUELINE M Name:	SIGNATUR lection Cam DFFICERS itle:	of Florida. Electror paign Financing AND DIREC	nic Signature of Registered Agg Trust Fund Contribution (). TORS:	pent ADDITIONS/CHANGI Title:	Date ES TO OFFICERS AND DIRECTORS
Name: WHETSTINE, JACQUELINE M. Name: Address: 1502 E 40TH PLACE Address: City-St-Zip: LYNN HAVEN, FL City-St-Zip: Title: VP () Delete Title: () Change () Addition Name: WHETSTINE, JACQUELINE M Name:	SIGNATUR Jection Cam DFFICERS itle: ame:	of Florida. Electror paign Financing AND DIREC P () WHETSTINE, J	nic Signature of Registered Agg Trust Fund Contribution (). TORS:) Delete ACK	pent ADDITIONS/CHANGI Title: Name:	Date ES TO OFFICERS AND DIRECTORS
Name: WHETSTINE, JACQUELINE M. Name: Address: 1502 E 40TH PLACE Address: City-St-Zip: LYNN HAVEN, FL City-St-Zip: Title: VP () Delete Title: () Change () Addition Name: WHETSTINE, JACQUELINE M Name:	lection Cam OFFICERS itle: ame: ddress:	of Florida. Electror paign Financing AND DIREC P () WHETSTINE, J 1502 E 40TH P	nic Signature of Registered Agg Trust Fund Contribution (). TORS:) Delete ACK	ent ADDITIONS/CHANGI Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS
City-St-Zip: LYNN HAVEN, FL City-St-Zip: Title: VP () Delete Title: () Change () Addition Name: Name:	lection Cam DFFICERS itle: ame: ddress: ity-St-Zip:	ef Florida. Electror paign Financing AND DIREC P () WHETSTINE, J 1502 E 40TH P LYNN HAVEN,	nic Signature of Registered Agg Trust Fund Contribution (). TORS:) Delete ACK PLACE FL	ADDITIONS/CHANGI Title: Name: Address: City-St-Zip:	Date ES TO OFFICERS AND DIRECTORS () Change () Addition
Title: VP () Delete Title: () Change () Addition Name: WHETSTINE, JACQUELINE M Name:	election Cam DFFICERS itle: ame: ddress: ity-St-Zip: itte:	of Florida. Electror paign Financing AND DIREC P () WHETSTINE, J 1502 E 40TH P LYNN HAVEN,	nic Signature of Registered Ag g Trust Fund Contribution (). TORS:) Delete ACK 'LACE FL) Delete	ADDITIONS/CHANGI Title: Name: Address: City-St-Zip: Title:	Date ES TO OFFICERS AND DIRECTORS () Change () Addition
Name: WHETSTINE, JACQUELINE M Name:	election Cam DFFICERS itle: ame: ddress: ity-St-Zip: itle: ame:	Electror Electror AND DIREC P () WHETSTINE, J 1502 E 40TH P LYNN HAVEN, I S () WHETSTINE, J	nic Signature of Registered Ag g Trust Fund Contribution (). TORS:) Delete ACK 'LACE FL) Delete ACQUELINE M.	ADDITIONS/CHANGI Title: Name: Address: City-St-Zip: Title: Name:	Date ES TO OFFICERS AND DIRECTORS () Change () Addition
•	election Cam DFFICERS itle: ame: ddress: ity-St-Zip: itle: ame: ddress:	Electror Electror AND DIREC WHETSTINE, J 1502 E 40TH P LYNN HAVEN, I S WHETSTINE, J 1502 E 40TH P	nic Signature of Registered Ag g Trust Fund Contribution (). TORS:) Delete ACK PLACE FL) Delete ACQUELINE M. PLACE	ADDITIONS/CHANGI Title: Name: Address: City-St-Zip: Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS () Change () Addition
Address: 1502 E 401H PLACE Address:	lection Cam DFFICERS itle: ame: ddress: ity-St-Zip: itle: ame: ddress: ity-St-Zip:	Electron Ele	nic Signature of Registered Ag g Trust Fund Contribution (). TORS:) Delete ACK PLACE FL) Delete ACQUELINE M. PLACE FL	ADDITIONS/CHANGI Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Title: Title: Title: Title:	Date ES TO OFFICERS AND DIRECTORS () Change () Addition () Change () Addition
City St Zin: 1 VAIN HAVEN EI City St Zin:	lection Cam DFFICERS itle: ame: ddress: ity-St-Zip: itle: ame: ddress: ity-St-Zip: itle: ame: ity-St-Zip:	Electror Paign Financing AND DIREC WHETSTINE, J 1502 E 40TH P LYNN HAVEN, I WHETSTINE, J 1502 E 40TH P LYNN HAVEN, I WHETSTINE, J WHETSTINE, J WHETSTINE, J	nic Signature of Registered Ag g Trust Fund Contribution (). TORS:) Delete ACK PLACE FL) Delete ACQUELINE M. PLACE FL) Delete ACQUELINE M. PLACE FL	ADDITIONS/CHANGI Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	Date ES TO OFFICERS AND DIRECTORS () Change () Addition () Change () Addition
City-3t-Zip. Lithin fiaven, fl. City-5t-Zip.	lection Cam DFFICERS itle: ame: ddress: ity-St-Zip: itle: ame: ddress: ity-St-Zip: itty-St-Zip: itty-St-Zip: itty-St-Zip:	Electror Paign Financing AND DIREC WHETSTINE, J 1502 E 40TH P LYNN HAVEN, I WHETSTINE, J 1502 E 40TH P LYNN HAVEN, I VP WHETSTINE, J 1502 E 40TH P LYNN HAVEN, I	nic Signature of Registered Ag g Trust Fund Contribution (). TORS:) Delete ACK PLACE FL) Delete ACQUELINE M. PLACE FL) Delete ACQUELINE M. PLACE ACQUELINE M. PLACE ACQUELINE M. PLACE	ADDITIONS/CHANGI Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	Date ES TO OFFICERS AND DIRECTORS () Change () Addition () Change () Addition
Title: T () Delete Title: () Change () Addition Name: DANIELS, JESSICA M Name:	lection Cam DFFICERS itle: ame: ddress: ity-St-Zip: itle: ame: ddress: ity-St-Zip: itle: ame: ity-St-Zip:	Electror Paign Financing AND DIREC WHETSTINE, J 1502 E 40TH P LYNN HAVEN, I WHETSTINE, J 1502 E 40TH P LYNN HAVEN, I WHETSTINE, J WHETSTINE, J WHETSTINE, J	nic Signature of Registered Ag g Trust Fund Contribution (). TORS:) Delete ACK PLACE FL) Delete ACQUELINE M. PLACE FL) Delete ACQUELINE M. PLACE ACQUELINE M. PLACE ACQUELINE M. PLACE	ADDITIONS/CHANGI Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	Date ES TO OFFICERS AND DIRECTORS () Change () Addition () Change () Addition

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.

Address:

City-St-Zip:

SIGNATURE: JACKIE WHETSTINE VP 04/25/2008

7217 LAKE SUZZANNE LANE

PANAMA CITY, FL 32404

Address:

City-St-Zip: