

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000028983

Entity Name: JACKSON TOTAL SERVICE, INC.

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

3727 ENTERPRISE AVE
NAPLES, FL 34104 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 9589
NAPLES, FL 34101 US

New Mailing Address:

FEI Number: 65-0406161 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JACKSON, PAUL D PRES
3727 ENTERPRISE AVE
NAPLES, FL 34104 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: TD () Delete
Name: PASTIAN, RUBEN
Address: 1573 GILBERT AVE S
City-St-Zip: LEHIGH ACRES, FL 33971

Title: VD () Delete
Name: RINGO, NEILISA
Address: 123 FOXGLEN DR
City-St-Zip: NAPLES, FL 34104

Title: PD () Delete
Name: JACKSON, PAUL DEAN
Address: 310 BURNING TREE DR
City-St-Zip: NAPLES, FL 34105

Title: SD () Delete
Name: BUDEK, GRY M
Address: 4951 GULFSHORE BLVD N 104
City-St-Zip: NAPLES, FL 34103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PASTIAN, RUBEN
Address: 1573 GILBERT AVE S
City-St-Zip: LEHIGH ACRES, FL 33971

Title: VTD (X) Change () Addition
Name: RINGO, NEILISA
Address: 123 FOXGLEN DR
City-St-Zip: NAPLES, FL 34104

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: BUDEK, GRY M
Address: 619 NEAPOLITAN WAY
City-St-Zip: NAPLES, FL 34103

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: NEILISA RINGO

VP

04/29/2009

Electronic Signature of Signing Officer or Director

Date