

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000030047

FILED  
Jul 07, 2006  
Secretary of State

Entity Name: JACASA, INC.

**Current Principal Place of Business:**

4821 CLARK ROAD  
SARASOTA, FL 34233 US

**New Principal Place of Business:**

**Current Mailing Address:**

4821 CLARK ROAD  
SARASOTA, FL 34233 US

**New Mailing Address:**

FEI Number: 65-0720135      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WILDE, MARK H MR  
7021 S TAMIAMI TRL #D  
SARASOTA, FL 34231 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DPT ( ) Delete  
Name: WILDE, MARY ANN  
Address: 7021 S TAMIAMI TRL #D  
City-St-Zip: SARASOTA, FL 34231

Title: DVP ( ) Delete  
Name: WILDE, MARK H  
Address: 7021 S TAMIAMI TRL #D  
City-St-Zip: SARASOTA, FL 34231

Title: VPS ( ) Delete  
Name: PALMER, DEAN  
Address: 7021 S TAMIAMI TRL #D  
City-St-Zip: SARASOTA, FL 34231

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: A.KENNEDY

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

MGR

07/07/2006

\_\_\_\_\_ Date