2005 FOR PROFIT CORPORATION **ANNUAL REPORT-**

SIGNATURE:

Feb 09, 2005 08:00 AM Secretary of State **DOCUMENT # P94000031054** J & W INC. OF PERDIDO KEY Principal Place of Business Mailing Address 168 MANRESA RD 101 S JEFFERSON ST SAINT AUGUSTINE, FL 32084 PENSACOLA, FL 32501 02022005 CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3245084 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MCCALLUM, JAMES A DO NOT WRITE 168 MANRESA RD SAINT AUGUSTINE, FL 32084 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution, Added to Fees 10. OFFICERS AND DIRECTORS TITLE D NAME MCCALLUM, JAMES A STREET ADDRESS 168 MANRESA RD CITY-ST-ZIP SAINT AUGUSTINE, FL 32084 U00000221833 TITLE 02/09/05-80049-010 150<u>.00</u> NAME MCCALLUM, JAMES W STREET ADDRESS P O BOX 6125 N/A CITY-ST-ZIP N AUGUSTA, SC 29841 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f). 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 reserver 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 in changed, or on an attachment with an address, with an other statutes.

to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

FILED