## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P94000076824

**Entity Name:** JCM CORPORATION

FILED Jan 03, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1025 CHESTNUT ROAD NORTH LAKELAND, FL 33805

**Current Mailing Address: New Mailing Address:** 

POST OFFICE BOX 8950 LAKELAND, FL 33806

FEI Number: 59-3276846 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:

HINSON, MARY A 1025 CHESTNUT ROAD NORTH LAKELAND, FL 33805

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

Title:

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

Title: ( ) Delete WATKINS, JOHN F. Name:

WATKINS, JOHN F. Name: 1144 WEST GRIFFIN RD 1025 CHESTNUT ROAD NORTH Address: Address: LAKELAND, FL 33805 US

City-St-Zip: LAKELAND, FL City-St-Zip:

Title: VD Title: VD (X) Change ( ) Addition () Delete WATKINS, JOHN C. Name: Name: WATKINS, JOHN C.

1144 WEST GRIFFIN ROAD 1144 WEST GRIFFIN ROAD Address: Address:

LAKELAND, FL LAKELAND, FL 33805 US City-St-Zip: City-St-Zip:

( ) Delete Title: Title: (X) Change ( ) Addition VD VD

WATKINS, MICHAEL L. WATKINS, MICHAEL L. Name: Name: 1144 WEST GRIFFIN RD 1144 WEST GRIFFIN RD Address: Address: City-St-Zip: LAKELAND, FL City-St-Zip: LAKELAND, FL 33805 US

Title: ( ) Delete Title: (X) Change ( ) Addition

HINSON, MARY A. HINSON, MARY A. Name: Name:

Address: 1144 WEST GRIFFIN RD Address: 1025 CHESTNUT ROAD NORTH City-St-Zip: LAKELAND, FL City-St-Zip: LAKELAND, FL 33805 US

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: JOHN F. WATKINS PD 01/03/2007