

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000086745

Entity Name: JAXSN, INC.

FILED
Feb 04, 2009
Secretary of State

Current Principal Place of Business:

8110 CYPRESS PLAZA DRIVE
304
JACKSONVILLE, FL 322564463

New Principal Place of Business:

1032-1 DUNN AVENUE
JACKSONVILLE, FL 32218

Current Mailing Address:

8110 CYPRESS PLAZA DRIVE
304
JACKSONVILLE, FL 322564463

New Mailing Address:

P.O. BOX 77158
JACKSONVILLE, FL 32226

FEI Number: 59-3279285

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURNETT, STEVE
8110 CYPRESS PLAZA DRIVE
304
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

BURNETT, STEVE
1032-1 DUNN AVENUE
JACKSONVILLE, FL 32218 US

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: STEVE BURNETT

02/04/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: BURNETT, STEVE R
Address: 3069 SUNSET LANDING DRIVE
City-St-Zip: JACKSONVILLE, FL 32226

Title: D (X) Delete
Name: FORTNER, KAY K
Address: 3581 SIR ROGERS COURT
City-St-Zip: JACKSONVILLE, FL 32224

Title: D (X) Delete
Name: FORTNER, PERB
Address: 3581 SIR ROGERS COURT
City-St-Zip: JACKSONVILLE, FL 32224

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 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: STEVE BURNETT

P

02/04/2009

Electronic Signature of Signing Officer or Director

Date