

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2007 8:00 am
Secretary of State

04-10-2007 90017 030 ***150.00

DOCUMENT # P95000017802

1. Entity Name
J & C MANAGEMENT, INC.



Principal Place of Business
**720 NE HWY 19
CRYSTAL RIVER, FL 34429**

Mailing Address
**720 NE HWY 19
CRYSTAL RIVER, FL 34429 US**

40055571



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03052007 Chg-P CR2E034 (12/06)

City & State

City & State

4. FEI Number
59-3299801

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BARD, CARLA A
720 NE HWY 19
CRYSTAL RIVER, FL 34429**

Name
Rachael Langley
Street Address (P.O. Box Number is Not Acceptable)
1704 N. Common Pt.

City
Lecanto FL Zip Code
34461

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

Rachael Langley

(NOTE: Registered Agent signature required when reinstating)

3/1/07

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
P ☒ Delete
NAME
BARD, CARLA A
STREET ADDRESS
1230 SE KINGSBAY DR
CITY-ST-ZIP
CRYSTAL RIVER, FL 34429

TITLE
Pres ☒ Change ☐ Addition
NAME
Rachael Langley
STREET ADDRESS
1704 N Common Pt
CITY-ST-ZIP
Lecanto, Fl 34461

TITLE
VP ☐ Delete
NAME
BARD, JOHN J SR
STREET ADDRESS
1230 SE KINGSBAY DR
CITY-ST-ZIP
CRYSTAL RIVER, FL 34429

TITLE
Lecanto, Fl ☐ Change ☐ Addition
NAME
Carla Bard
STREET ADDRESS
1230 SE Kingsbay Dr
CITY-ST-ZIP
Crystal River, Fl 34429

TITLE
ST ☒ Delete
NAME
LANGLEY, RACHAEL S
STREET ADDRESS
1704 N COMMON PT
CITY-ST-ZIP
LECANTO, FL 34461

TITLE
sec/Trea ☒ Change ☐ Addition
NAME
Carla Bard
STREET ADDRESS
1230 SE Kingsbay Dr
CITY-ST-ZIP
Crystal River, Fl 34429

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Rachael Langley

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/1/07

Date

**352
795 0099**

Daytime Phone #