

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000035157

Entity Name: JS CASH, INC.

FILED  
Jun 16, 2008  
Secretary of State

**Current Principal Place of Business:**

17215 TIFFANY SHORE DRIVE  
LUTZ, FL 33549 US

**New Principal Place of Business:**

28622 STATE RD 52  
SAN ANTONIO, FL 33576 US

**Current Mailing Address:**

17215 TIFFANY SHORE DRIVE  
LUTZ, FL 33549 US

**New Mailing Address:**

28622 STATE RD 52  
SAN ANTONIO, FL 33576 US

FEI Number: 59-3328078

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CASH, JEFFREY S  
17215 TIFFANY SHORE DRIVE  
LUTZ, FL 33549 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: P ( ) Delete  
Name: CASH, JEFFREY S  
Address: 17215 TIFFANY SHORE DRIVE  
City-St-Zip: LUTZ, FL 33549 US

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

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: J SCOTT CASH

P

06/16/2008

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

\_\_\_\_\_ Date