

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000058863

FILED
Apr 16, 2009
Secretary of State

Entity Name: JENKINS CONSTRUCTION, INC. III

Current Principal Place of Business:

11500 NORMANDY BLVD
JACKSONVILLE, FL 32221 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 7847
JACKSONVILLE, FL 32238 US

New Mailing Address:

FEI Number: 59-3359590 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JENKINS, DONNA R.
11500 NORMANDY BLVD
JACKSONVILLE, FL 32221 US

Name and Address of New Registered Agent:

JENKINS, DONNA R.
11500 NORMANDY BLVD
JACKSONVILLE, FL 32221 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: DONNA R. JENKINS

04/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: JENKINS, DONNA R
Address: 3206 FRONT ROAD
City-St-Zip: JACKSONVILLE, FL 32257

Title: VP () Delete
Name: JENKINS, MARK A
Address: 3662 MOSSWOOD CT
City-St-Zip: JACKSONVILLE, FL 32223

Title: S () Delete
Name: JENKINS, DONNA R
Address: 3206 FRONT ROAD
City-St-Zip: JACKSONVILLE, FL 32257

Title: T () Delete
Name: JENKINS, DONNA R
Address: 3206 FRONT RD.
City-St-Zip: JACKSONVILLE, FL 32257

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: JENKINS, DONNA R
Address: PO BOX 7847
City-St-Zip: JACKSONVILLE, FL 32238 US

Title: VP (X) Change () Addition
Name: JENKINS, MARK A
Address: PO BOX 7847
City-St-Zip: JACKSONVILLE, FL 32238 US

Title: S (X) Change () Addition
Name: JENKINS, DONNA R
Address: PO BOX 7847
City-St-Zip: JACKSONVILLE, FL 32238 US

Title: T (X) Change () Addition
Name: JENKINS, DONNA R
Address: PO BOX 7847
City-St-Zip: JACKSONVILLE, FL 32238 US

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: DONNA R. JENKINS

DP

04/16/2009

Electronic Signature of Signing Officer or Director

Date