

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000072757

FILED  
Jan 03, 2006  
Secretary of State

Entity Name: JSK CORP.

**Current Principal Place of Business:**

5795 MINING TERRACE  
JACKSONVILLE, FL 32257

**New Principal Place of Business:**

**Current Mailing Address:**

5795 MINING TERRACE  
JACKSONVILLE, FL 32257

**New Mailing Address:**

FEI Number: 59-3344204      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

MUMFORD, MARGUERITE  
1633 SILVER STREET  
JACKSONVILLE, FL 32206      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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MUMFORD, MARGUERITE  
Address: 1633 SILVER STREET  
City-St-Zip: JACKSONVILLE, FL 32206

Title: S (X) Delete  
Name: KLEIN, CHRIS  
Address: 106 BERMUDA COURT  
City-St-Zip: PONTE VERDE BEACH, FL 32082

Title: VP ( ) Delete  
Name: MUMFORD, MICHAEL G  
Address: 1633 SILVER STREET  
City-St-Zip: JACKSONVILLE, FL 32206

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP,S (X) Change ( ) Addition  
Name: MUMFORD, MICHAEL G  
Address: 1633 SILVER STREET  
City-St-Zip: JACKSONVILLE, FL 32206

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: MARGUERITE MUMFORD

P

01/03/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date