2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 18, 2008 8:00 am
Secretary of State
07-11-2008 90018 020 ***158.75
08-18-2008 90003 049 ***400.00

DOCUMENT # P96000015712

1. Entity Name
JAY AG AIR, INC.

Principal Place of Business	Mailing Address
6447 DIXONVILLE RD JAY, FL 32565	6447 DIXONVILLE RD. JAY, FL 32565

DO NOT WRITE IN THIS SPACE

07082008 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3362024
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

GOLDEN, DANIEL E
6447 DIXONVILLE RD.
JAY, FL 32565

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $550.00
Due by September 12, 2008

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	GOLDEN, DANIEL E
STREET ADDRESS	6447 DIXONVILLE RD
CITY-ST-ZIP	JAY, FL 32565
TITLE	D
NAME	GOLDEN, CATHY L
STREET ADDRESS	6447 DIXONVILLE RD.
CITY-ST-ZIP	JAY, FL 32565
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: Cathy L Golden 6-30-08 8506754817
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Cathy L. Golden