

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2006 08:00 AM
Secretary of State

DOCUMENT # P96000087289	
1. Entity Name J. MICHAEL ENTERPRISE, INC.	

Principal Place of Business 2840 CR 220 MIDDLEBURG FL 32068	Mailing Address 2840 CR 220 MIDDLEBURG FL 32068
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DO NOT WRITE IN THIS SPACE	03172006 No Chg-P CR2E034 (11/05)
	4. FEI Number 59-3415384
	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent LODGE, JAMES M 2840 CR 220 MIDDLEBURG, FL 32068

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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 _____ Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to fees
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TITLE NAME	DPVS
STREET ADDRESS CITY - ST - ZIP	2840 CR 220 MIDDLEBURG FL 32068
TITLE NAME	T
STREET ADDRESS CITY - ST - ZIP	2840 CR 20 MIDDLEBURG FL 32068
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: <i>J.M. Lodge</i>	J.M. LODGE	4-3-06	904-403-9420
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