## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000025037

Entity Name: JERICHO PERFORMANCE, INC.

FILED Jan 21, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1518 ULTRAMARINE LANE 107 GRAHAM STREET SE

PUNTA GORDA, FL 33983 US PORT CHARLOTTE, FL 33952 US

Current Mailing Address: New Mailing Address:

1518 ULTRAMARINE LANE 107 GRAHAM STREET SE

PUNTA GORDA, FL 33983 US PORT CHARLOTTE, FL 33952 US

FEI Number: 65-0740143 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MYERS, DEBRA L

1518 ULTRAMARINE LANE

MYERS, DEBRA L

107 GRAHAM STREET SE

PUNTA GORDA, FL 33983 US PORT CHARLOTTE, FL 33952 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: DEBRA L. MYERS 01/21/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition

Name:MYERS, DEBRA L.Name:MYERS, DEBRA L.Address:1518 ULTRAMARINE LANEAddress:107 GRAHAM STREET SECity-St-Zip:PUNTA GORDA, FL 33983City-St-Zip:PORT CHARLOTTE, FL 33952

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: DEBRA L. MYERS PRES 01/21/2008