

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 27, 2006 08:00 AM
Secretary of State

DOCUMENT # P97000031192 1. Entity Name JACKSON'S AUTO PARTS & ACE HARDWARE, INC.	
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Principal Place of Business HIGHWAY 98 CARRABELLE FL	Mailing Address P.O. BOX L CARRABELLE FL 32322 US
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2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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1st MOORE CR2E034 (10/05)

4. FEI Number 59-3416655	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent HOWELL, WINSTON K 2120 KILLEARNEY WAY TALLAHASSEE FL 32308
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7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____
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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 _____	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE	D <input type="checkbox"/> Delete JACKSON, VIRGINIA
STREET ADDRESS	HIGHWAY 98
CITY-ST-ZIP	CARRABELLE FL
TITLE	D <input type="checkbox"/> Delete JACKSON, RONNIE
STREET ADDRESS	HIGHWAY 98
CITY-ST-ZIP	CARRABELLE FL
TITLE	D <input type="checkbox"/> Delete JACKSON, DAVID
STREET ADDRESS	HIGHWAY 98
CITY-ST-ZIP	CARRABELLE FL
TITLE	VP <input type="checkbox"/> Delete JACKSON, GEORGE
STREET ADDRESS	HWY 98
CITY-ST-ZIP	CARRABELLE FL 32322
TITLE	<input type="checkbox"/> Delete
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add H00000406006 02/07/06-80064-009 150.00
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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, 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: Ronald Jackson Ronald Jackson 1/26/06 850-697-3332