2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000076625

Entity Name: JCT ASSOCIATES, INC.

FILED Mar 29, 2006 Secretary of State

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

8152 TANTALLON WAY 2418 U.S. HWY. 19 NEW PORT RICHEY, FL 34655 HOLIDAY, FL 34691

Current Mailing Address: New Mailing Address:

8152 TANTALLON WAY 2418 U.S. HWY. 19 NEW PORT RICHEY, FL 34655 HOLIDAY, FL 34691

FEI Number: 59-3471560 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:

TASSILLO, JOAN

8152 TANTALLON WAY

NEW PORT RICHEY, FL 34655 US

TASSILLO, JOAN
2418 U.S. HWY. 19
HOLIDAY, FL 34691 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: JOAN TASSILLO 03/29/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 TASSILLO, JOAN
 Name:
 TASSILLO, JOAN

 Address:
 8152 TANTALLON WAY
 Address:
 2418 U.S. HWY. 19

 City-St-Zip:
 NEW PORT RICHEY, FL 34655
 City-St-Zip:
 HOLIDAY, FL 34691

 $\label{eq:title:V} {\sf Title:} \qquad {\sf V} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf V} \qquad {\sf (X) Change () Addition}$

 Name:
 TASSILLO, CHARLES M.
 Name:
 TASSILLO, CHARLES M.

 Address:
 8152 TANTALLON WAY
 Address:
 2418 U.S. HWY. 19

 City-St-Zip:
 NEW PORT RICHEY, FL 34655
 City-St-Zip:
 HOLIDAY, FL 34691

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: CHARLES M. TASSILLO VP 03/29/2006