

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000097086

Entity Name: J. GILES & ASSOCIATES, INC.

FILED  
Mar 31, 2010  
Secretary of State

**Current Principal Place of Business:**

5820 COVE DRIVE  
ORLANDO, FL 32812

**New Principal Place of Business:**

**Current Mailing Address:**

5820 COVE DRIVE  
ORLANDO, FL 32812

**New Mailing Address:**

FEI Number: 59-3483590

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GILES, DORA J  
5820 COVE DRIVE  
ORLANDO, FL 32812 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D  
Name: GILES, DORA J  
Address: 5820 COVE DR  
City-St-Zip: ORLANDO, FL 32812

Title: S  
Name: GILES, JEFFREY S  
Address: 4308 ARAJO CT.  
City-St-Zip: ORLANDO, FL 32812

Title: S  
Name: GILES, JENNIFER L  
Address: 4308 ARAJO CT  
City-St-Zip: ORLANDO, FL 32812

I hereby 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 all other like empowered.

SIGNATURE: D. JANE GILES

DIRE

03/31/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date